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Discourse Tensions: Professional socialisation into nursing within the university education system

Jackson S and Steven A. Nurse Education Today 2020

Abstract

Starting university brings expectations of new experiences and a good social life (Morton and Tighe 2011), however student nurse experience may not mirror these expectations. The aim of this study was to identify any indications of ‘differentness’ expressed in students talk, track development and changes in student language over the duration of their programme, and explore how language might situate lecturers and students within a professional socialisation process.

Using Discourse Analysis (Potter and Wetherell 1987), interviews (n=17) were conducted with 8 lecturers and 7 volunteer student nurses multiple times over 3 years (April 2013 – August 2016). Analysis uncovered three discourse tensions, each showing resonance with students and their lecturers: The university student and the student nurse; The Nursing and Midwifery Council registrant and the lecturer; Student nurses as consumers of their university education.

Students did not appear to align themselves with the university after experiencing clinical practice, and lecturers’ language attempted to position students away from traditional student experiences to protect professional standards.

Key words: Nurse Education, Student Nurse Experience, Discourse Analysis, Professionalism
in Nurse Education

Introduction

Nursing and Midwifery Education Standards (2010) require student nurses time to be divided equally between academic study (in university) *and* nursing practice (in a care setting). To enter the national UK register students must achieve competencies and exhibit appropriate professional values and behaviours during pre-registration programmes. Such values, behaviours, and sense of professional identity are internalised through the hidden curriculum and role-modelling lecturers and clinicians (Hunter and Cook 2018). Studies have investigated pre-registration socialization (Mackintosh 2006, Keeling and Templeman 2013), but few explore this process through language. Monrouxe *et. al.* (2017) captured student narratives during their professional journey, but focused on clinical practice only. Nurse lecturers and ‘practicing’ nurses share responsibility for the professional socialisation of students (Hunter and Cook 2018). However, it is nurse lecturers who organise university learning according to UK regulatory body, the Nursing and Midwifery Council (NMC) Education Standards (2010). Consequently, *how* language is used *by* lecturers, *towards* student nurses offers valuable insight into the socialisation of student nurses while at university.

When starting university, there are expectations of making friends and an enjoyable social life (Morton and Tighe 2011). A survey of 4,000 students from US, China, India, Spain and Italy (Sodexo 2004) found UK students most likely to choose a university based on social and non-academic factors (38%). The social aspect of university is exemplified in numerous internet ‘memes’ (stories or images spread virally) portraying university students partying and sleeping late. This portrayal is also reflected in interviews with students from the Netherlands, Turkey, USA, and Norway (Burch 2013). However, for nursing students university experience may be

different. The average age of a university student in the UK is 18-20 (UCAS 2017). For UK student nurses in 2017 it was 29, but the trend suggests an increase in those 18-20 (UCAS 2017).

Bosely (2009 p1) reporting in 'The Guardian' noted how nurse lecturers at one university cautioned students not to '*go too wild*' in fresher's week, saying they were '*warned ominously that they should avoid anything that might have an impact on their future careers*'. Quoting the Nursing and Midwifery Council (NMC), Bosely (2009 p1) suggests student nurses face '*a tricky balancing act when it comes to combining a fun social life with the responsibility for care for patients and vulnerable people*'. Rodriguez-Gazquez, *et al.* (2017) found the lifestyle of one in three student nurses from two Spanish universities was considered inappropriate and could negatively influencing care. Therefore, while division of time between 'study' locations (university and clinical) is one 'differentiating' element of nurse education, there appears to be other responsibilities placed on nursing students, not experienced by university students on non-professional programmes (Bosely 2009).

This 'additional responsibility' may form part of professional socialisation, however it is unclear if student nurses perceive any pressures on them during their education which might make them feel 'different,' or what impact any experience of difference may have. It is also unclear if nurse lecturers are cognisant of any influences or experiences of 'difference'. Finn, Garner and Sawdon (2010) reported medical students struggling with their split identity as medical student and university student. Drawing on Stryker's (2008) identity change process theory, Hamilton (2019) found Social Work students balancing multiple shifting identities, student, worker, and parent. However, there is little research comparing experiences of student nurses with those of non-health care university students, including students studying on programmes leading the professional body recognition such as law and architecture.

To explore nursing student experiences of professional socialisation during pre-registration university education, this study employed a Discourse Analysis (DA) approach as defined by Potter and Wetherell, (1987) to examine language use by nursing students and lecturers.

The study

Language is key to the expression of experience. We construct our world through talk (Migdely 2004). Language is therefore key to the way concepts, such as socialisation into a professional identity, are instilled (Monrouxe *et al.* 2011).

The aim of this study was therefore to identify and explore

- any indications of ‘differentness’ expressed in student talk
- any development or changes in students talk during an undergraduate nursing programme
- if, and how language might situate lecturers and students within a socialisation, or professional identity development process

Design

Discursive Psychology [Discourse and Social Psychology (DASP)] as defined by Potter and Wetherell (1987), asks *why* talk is created, and what do people *do* with it. Potter and Wetherell (1987) have used text and language not only to describe communication practices, but also as a way of looking at social practice. The goal of DA is to explain what is being ‘done’, and ‘how’ that has been achieved through the language (Wood and Kroger 2000). DA explores how talk is structured to perform various functions and achieve consequences (Wood and Kroger 2000).

Participants, setting and recruitment

Sample sizes in DA tend to be small since interest is on language use rather than numbers of participants (Wood and Kronger 2000). A volunteer sample of seven first year student nurses, and eight nurse lecturers, from all fields of nursing, were recruited in 2013. Students were new to university and not yet experienced clinical placements, ages ranged from 18-30 years, with an average age of 24 years. Lecturers were experienced educators having worked in nurse education for between 5 and 22 years.

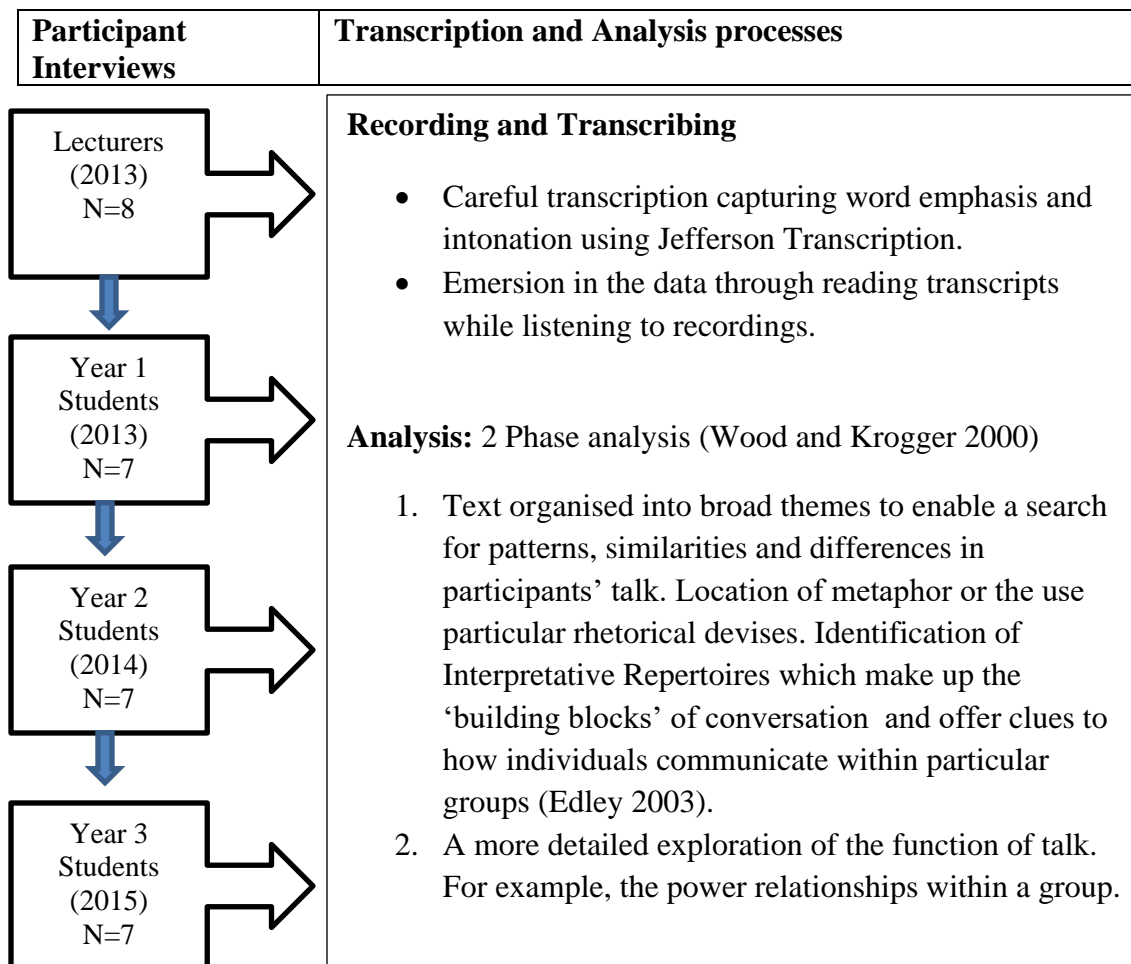
Data collection

Lecturers and students were interviewed separately as individuals, or in small homogenous groups depending on preference and availability. Multiple interviews were conducted with students to enable tracking of language and experience changes. One interview was conducted with lecturers as it was reasoned that language use would not change significantly given they were already fully engaged members of the discourse community. Seventeen (n=17) interviews were conducted between 2013-2016, each lasting approximately one hour. A semi-structured interview schedule enabled participants to engage in discussion and raise issues of interest to them. Initial interview questions were broad, *“Can you tell me what it is like to be a student nurse at university?”*, and for lecturers, *“Can you tell me about?”*. Keller (2013) calls for data collection to be theoretically driven. Therefore, analysis of one set of interviews influenced subsequent theoretical sampling and data collection (Strauss and Corbin 1998).

Data analysis

Digitally recorded interviews were carefully transcribed verbatim. To capture greater emphases on some words, overlapping and interrupting talk, the Jefferson transcription style was used (Potter and Wetherell 1987). **DIAGRAM 1 describes Methods, Design and Components of the analysis phase of the study.**

DIAGRAM 1: Methods, Design and Components of Analysis



Ethics

Approval was obtained from the university Research Ethics Committee. Written consent was secured at each interview. The right to withdraw was reiterated each time. Participants' names have been changed to protect identity.

Rigor

'Trustworthiness' and 'Soundness' are indicated for assessing rigor in discourse analysis (Wood and Kroger 2000). 'Trustworthiness' is exhibited through orderliness and transparency of documentation. Rigor is enhanced via an audit trail, including transparent discussion of analysis processes and examples of patterns of speech and grammatical features. 'Soundness' consists of seven criteria; orderliness, demonstration, orientation, claim checking, summary, coherence, and plausibility and fruitfulness.

Findings

Analysis of student and lecturer talk uncovered some tensions, or ideological dilemmas, regarding experiences of the nurse education process in university and professional socialisation. Ideological dilemmas are defined as part of any culture or communities' 'common sense' and are beliefs and practices that may be inconsistent and contradictory but offer insight into a way of life (Billig *et al.* 1988). This paper focuses on three tensions heard in student nurses talk: The university student and the student nurse; The NMC registrant and the lecturer; Student nurses as consumers of university education. These tensions showed resonance with lecturers' words, suggesting shared discourses.

Shared Discourse 1: The university student and the student nurse

Student talk revealed tensions between their position as student nurses on a professional programme, compared to other students. '.... *it's like their student life and our student life*'. [SC1P1]. Expectations of the more 'traditional' student experience is heard in Jason's quote below.

Student Nurse Jason (year 1): *I think the traditional idea of a student is very much like, a rite of passage that you leave home at eighteen and you spend a lot of time drinking and, like, enjoying yourself really. [SA1P3]*

The students made a distinction between 'student nurses' and students generally. The implication was that certain traditional student behaviours might be viewed as having greater negative consequences for student nurses than for other students.

Student Nurse Stacey (year 1): *... I'm 18 and people go out and they do ridiculous things and there are times when we have to... stand back and think: ..., this is all very well, if you're doing history or something that nobody can bring it back to you, but if we get caught doing something..., there's times when we just have to walk away. [SC1P1]*

Student talk appeared influenced by lecturers' warnings regarding unprofessional behaviours. Sarah's seemingly benevolent comment below, appears to protect students from getting into a position that might compromise their nursing career. Her talk 'warns' student nurses away from nights out and engagement in excesses. Foucault (1997d) notes that those who exercise power

attain legitimacy by presenting themselves as helping. Thus, caring may imply controlling (Foucault 1997d).

Lecturer Sarah: *But we always warn them. You know, “Be careful on Friday night”. [LMH1P4]*

Students not heeding the warnings may require punishment as heard from Lecturer Tony, where he feels obliged to ‘*deal with*’ unprofessional students.

Lecturer Tony: *I’ve had to deal with the students who’ve been cautioned for being drunk and disorderly and they’ve been with a group of other students... I would say to students it’s the Newspaper test, you know. How would it look on the front of the paper, ‘Student Nurse involved in such-and-such a behaviour’ has a different connotation if it’s a student in arts. [LA1P3]*

Differences in language used for student nurses, relative to other university students, is a consistent feature and supported by metaphor use, such as ‘*clash of cultures*’, ‘*split personality*’ and ‘*split role*’. The division, or ‘*split role*’, is represented photographically on the front cover of the NMC (2008) Guidance on Professional Conduct for Nursing and Midwifery Students. The picture shows a student nurse divided by a vertical line -half shows the student in casual clothes, hair down, half in nurse’s uniform dress, hair up.

Lecturer Tony: *.....they do have incredible difficulties with it. They want to be a student...the university itself sells itself on being a great student experience, a party city, and then there’s the professional expectations.... So, there are tensions between student acceptable behaviours and the kind of professional set of behaviours. It’s a clash of cultures. [LA1P2]*

Lecturer Julie: *...we’ve got that tension. They are student nurses and the first part of that title is ‘student’. The second is ‘nurse’ and that’s where all of the vocational weight comes in. There is a fundamental tension: ‘I behave ‘well’ in practice’.. ‘I can be less fastidious with my behaviour on campus because this is*

just uni and I'm a student' ... they've got a split personality; a split role.
[LA1P2]

The word '*tension*' appears in lecturer talk eight times. At any time, a student nurse can be in university studying theory or in clinical practice working with qualified nurses and caring for patients. Both positions present different challenges in the lecturers' talk, represented in terms of 'tensions'.

Julie's use of '*fundamental*' is revealing since this word can be defined as something upon which everything else develops (Cambridge Dictionary, 2017 (Online)). One interpretation might be that there is a flaw in the basic premise associated with nurse education in the university setting which causes these tensions. Julie positions this 'tension' within the lecturers' domain rather than with the student. Lecturer Tony (above) states categorically that '*there are tensions*', acknowledging their existence without aligning them specifically to lecturers or students. These different rhetorical features are indicative of difficulties in determining one single cause of 'tension'. The presence of multiple causes of tension may help maintain this tension, perpetuating 'othering' and difference from other university students.

Julie's use of '*vocational weight*' infers importance on expectations of being a student nurse. This talk recognises students are 'at' university, but that the balance with their position as student nurses is of greater standing. This highlights the segmented experience of student nurses as university students (Bucher 1970). Messages are '*instilled*' and '*drummed*' into students ensuring they appreciate their importance. The level of agency in lecturers' talk positions these messages purposefully, making sure students know they are *different*.

Lecturer Anita: ... *from day one, we say "But you're on a vocational, professional course., ... we expect something different, because you are expected*

to behave professionally in uni as well as in practice, because you are being judged as a professional". [LA1P1]

Student Nurse Jayne (year 1):it was instilled into us: this is a professional course and this is how we expect you to act and this is what our expectations are of you. ...it's been drummed into us the way we're expected to be at university with regards to professionalism.... it's definitely affected who you are in your personal life and university social life. [SC1P2]

Similar talk to Student Nurse Jayne can also be heard in Bosely's (2009) interview with Carmel Lloyd, NMC Midwifery Advisor who says;

"Not only will they [student nurses] find themselves treating patients in the near future, they also need to take care to uphold the reputation of the profession in their personal lives as well".

Initially lecturer talk positioned students away from the university experience with the intention of preserving professional boundaries. However, by years 2 and 3, students' own talk *did* appear separate them from their university experience.

Student Nurse Stacey (year 2): ... people say "Oh, you've got loads of free time because you're at university" and I'm like: "No, because I'm not really a proper student... I'm doing a nursing course". [SC2P8]

Student Nurse Stacey (year 3): They [university students] don't qualify, they just graduate. Actually, to us, that's really scary. We're like "we've qualified; we're actually on a register now". I think it's a different kind of motivation for us. [SC3P13]

Further disassociation with university life and greater association with the professional role are shown in year 2 and 3 student talk. Rather than feeling like a student, this talk appears to position students as working members of the healthcare 'community'. **Kim (year 3):** *I don't feel like a*

student at all, it's like going to work. [SMH3P5], Gemma (year 3): You don't see yourself as a student, and you're working. [SA3P6], Joanne (year 2): ... people think they're just in university ... It's a job.... [SC2P8], Stacey (year 3): .. it's more like a community; We need a community, because we require support. [SC3P14]

Shared Discourse 2: The lecturer and NMC registrant

Nurse educators appear to belong to two discursive positions, that of the university lecturer *and* the NMC registrant. Their talk positions them as gatekeepers of the nursing profession *as well as* providers of a good university experience. The NMC's mission is to safeguard the health and wellbeing of the public (NMC 2015). This position presents some challenges for the lecturers' role. Anita (below) foregrounds the importance of maintaining professional standards but notes this may compromise student university experience and have negative implications for student feedback. For example, lecturers monitor attendance as stipulated by the NMC, with mandatory attendance comprising 2,300 hours of taught theory delivered in university and 2,300 hours within the practice learning setting (NMC 2010). Other university students are not generally monitored so closely. This has the potential to influence the lecturer identity in either clinical practice or education.

Lecturer Anita: *...we're registrants and we've got to protect the public and maintain professionalism and sometimes, the two don't sit comfortably. We've also got the 'business end' of the university, where we enhance the student experience. We're always conscious of the NSS [National Student Survey]. On the other hand, we've also got an obligation to 'deal with' inappropriate behaviour and sometimes that causes tension, it's what hat do you wear? [LA1P2]*

According to Melia (1984), the reality of ward nursing involves students ‘looking busy’, ‘being tidy’ and ‘pulling their weight’. There is some suggestion that these narratives continue into the education setting in an attempt to meet the requirement of both the profession *and* the student experience. However, Lecturer Rose (below) shows a change to her discursive position when discussing the informal environment created by lecturers to enable a good student-learning experience. A second position change is located with the metaphor ‘*victims of our own successes*’. The implied outcome, positions students as university students and appears to subvert the professionalism talk by suggesting that more informal discourses supports less professional behaviour.

Lecturer Rose: *We are a victim of our own successes because we want them to feel comfortable, we want them to be relaxed, we want them to feel we are unapproachable, we want to help with their learning. We don't want to be a scary sister in a navy blue uniform. [LC1P9]*

In offering the ‘good’ university experience, this promotes uncomfortable informality, not necessarily associated with professionalism and lecturer respect.

Lecturer Stewart: *... the informality of their emails like ‘Hi’, ‘LOL’ and kisses. I’ve marked exam papers where they’ve put LTR, L8R or something like that, for ‘later’.* [LA1P11]

Fairclough (2001) writes that formality restricts access to professions by generating a sense of awe amongst those excluded from it. Formality also has an impact on language use and can restrict how people behave (Fairclough 2001). Therefore, informality might be construed as students lacking professional respect for their lecturers.

Shared Discourse 3: The student nurse as a consumer of their education

Tensions in student talk define them as owners of *their* education experience. Nurse education empowers students to ask questions and challenge care (NMC 2012 p13), or challenge education providers via student complaint procedures. The University Student Charter encourages students to comment on their *whole* university experience via the UK National Student Survey.

Student nurses are educated to be assertive advocates for patients (NMC 2015), evaluate their own learning, and feedback on placement experiences (NMC 2010). This study found that when students advocated for themselves, lecturer response could be agency-laden. Such response may create fear of being labelled ‘troublemaker’.

Lecturer Julie: *‘Me’ culture. ... I want, I need. ...I can’t do the shifts, I want to move placement, ... What you’re saying is: it’s a very personal journey for you, but this is a collective endeavor. There’s this tension between consumerism and professionalism. I, I, I, means, my training, my education, my experience, further compounded by the National Student Survey. [LA1P13]*

Additionally students have expectations for their education and require the university and lecturers to meet *their* learning needs. This can be heard from Kim.

Student Nurse Kim (year 3): *... then someone says: “Oh, there’s a PowerPoint but I don’t like using slides, so I’ll chat about something for 45 minutes and let you go.” That’s not acceptable. Teach me something. I’m meant to be qualified and I don’t know how I’m going to do that. [SMH3P1]*

Her words ‘*not acceptable*’ indicate a discourse with the purpose of meeting *her* educational requirements.

Discussion

Positioning student nurses as ‘different’ to other university students

Lecturer discourses show conflicted talk relating to their position as university lecturers and ‘registered professionals’. This tension appeared to shape lecturers’ talk when positioning student nurses as ‘different’ or ‘special’. Potentially, this discourse conveys a perceived risk of dilution of student nurse professional socialisation *if* student nurses align talk with ‘other’ students. Lecturers are heard as fierce protectors of professional reputation, signifying group belonging and this may implicitly emphasise to students the importance of professional identity development. Consequently, their talk serves to keep students ‘*in line*’ with NMC regulation and ‘plays down’ university student experience.

The presence of the NMC may place ‘professional’ values above university rules and regulations (Unsworth 2011). Further evidence of the maintenance of ‘specialness’ of the nursing profession is seen in the words of the ‘Enabling Professionalism’ Framework (NMC 2017). The framework language portrays a strong focus on leadership and professional identity, sentiments which are echoed in international nursing body documents (ICN 2002). Throughout the framework document, the nursing profession categorises itself as self-controlling, suggesting ‘others’ are not in the same position, thus making nursing ‘special’ and different (NMC 2017). Professions such as social work and occupational therapy also note the influence of regulatory bodies and professional identity issues on lecturer’s activity (Hoksen 2018, O’Shea and McGrath 2019), with some framing this as disciplinary control (Hoksen 2018). Such ‘othering’ might promote what Bernstein refers to as ‘subject loyalty’, viewed as core to professional identity (Beck and Young

2005). In medicine the process of becoming a professional (Kaiser 2002) has been defined as a breaking down of individuality and uniqueness, and replacing it with professional ideology. Perhaps the positioning of student nurses as different to other university students through discourse functions to instil subject loyalty and professional identity –perhaps what is seen in the language of year 2 and 3 students in this study.

The status of nurse academics

The relationship between lecturer and student talk appeared complicated by dual roles of lecturer as employee of the university and NMC registrant/professional. Debates regarding nurse academic status are recognised in national and international literature (Andrew *et al.* 2009). Lecturers are positioned as professional gatekeepers *as well as* academic providers of a ‘good’ university experience. Adams (2011) highlights how nurse lecturers come into an academic context from a community of nursing practice with which they belonged and identified. The resulting combination of roles may create identity dissonance resulting in what Adams (2011 p889) refers to as ‘role crisis’. Similar issues are noted in Occupational Therapy where lecturers identity is underpinned by professional values and expertise brought from practitioner roles into higher education teaching (O’Shea and McGrath 2019). The combination of two discursive positions causes uncertainty regarding lecturers’ authentic identity in either community (Adams 2011). Perhaps in order to maintain at least one authentic identity ‘nursing’ as a university discipline is kept tightly ‘bounded’ through language. Such language may function to conserve and iterate the unique properties of the professional group (Horden 2015), thus creating a ‘specialness’ around university nurse lecturers

as a sub-group of nurses. Consequently lecturers find themselves in the contested space of the university where academic and professional (or discipline) specific identities vie with one another.

Students as consumers of education

The Dearing Report (1997) identified university students as consumers of education. The Student as Consumer (SaC) approach consolidates the inclusion of students and universities under the Consumer Rights Act (Gov.Uk 2015). Consumerism and the commercialisation of education has been noted in other countries (Raaper 2019 and Frost 2019). For those working in higher education these changes have resulted in performance criteria to demonstrate worth which, according to Beck and Young (2005) has undermined academic professional identity. The SaC position links to a culture where students seek to 'have' a degree rather than being learners (Molesworth, Nixon and Scullion 2009). Greatrix (2011) suggests this position changes university student behaviour to being more demanding.

Since September 2017, UK student nurses no longer receive bursaries and now pay tuition fees like other students (DoH 2016). The discursive position of student nurses *is* caught between the competing discourses of the university student and the student nurse. This position has congruity with Melia's (1984) notion of the segmented nature of nursing where students operate between the divided sectors of education and practice with movement between them being challenging (Melia 1984). Viewed from a different position, the segmented approach to nurse education might also serve to actively separate nursing students from that of the 'normal' university experience. Indeed students' talk seemed to disassociate them from the university experience after year one. Furthermore, lecturer talk serving to deter students from engaging in the wider university

experience may negatively influence National Student Survey (NSS) results and future student enrolment.

Conclusion

Findings suggest both student nurses and lecturers voice tensions in their relationship with the university education system. Student nurses do not have the same experience as other students, and are caught between nursing profession discourses and those of ‘the university student’.

These tensions can be viewed as a part of the socialization process, functioning to position nursing students as ‘*different*’ and ‘*special*’ – perhaps reinforcing ‘*otherness*’ and strengthening the professional identity of nursing. Further research is needed to understand the socialisation experiences and ‘talk’ of nursing students in other countries and non- health related students on professional programmes to determine if such competing profession orientated discourses are peculiar to the UK and or healthcare.

The NMC significantly influences the way student nurses and lecturers talk. Bosely (2009) asks if student nurses should be grateful for the NMC’s advice to curtail fresher’s activities, since this may protect their future career. Alternatively, one may ask should *all* students have the right to behave as they please while students. Indeed isolation from wider university community through working shifts, non-standard timetables, and limited access to students’ societies may restrict wider experiences and connections with other students (Shepherd 2009). It could be argued, that while student nurse behaviours are within NMC requirements, they should have equal access to a full university student experience; it is *their* choice, and *their* money. Further research is required to understand how student nurses manage tensions between their position as student nurses, and

those of their consumers' rights. From an education perspective, it may be prudent to highlight the competing discourses of the student nurse and university student, especially early in the education program where student talk suggests professional identity is still shaping (du Troit 1995).

An interesting finding was the speed by which student nurses *did* align their discourses with those of the nursing profession. It is not clear if this change in allegiance might be solely attributed to lecturer talk early in their programme, or if nursing language changes once students have experience of practice and direct patient care. Perhaps as a profession, nursing should question both the location of education, if it creates discomfort and dissonance, and the attitudes and values attributed to nursing's ideology of 'professionalism'. Nursing Apprenticeships (DoH 2016) and Nursing Associates (HEE, NHS 2015) offer alternative work-based routes in to nursing, both with the potential to provide different forms of socialization. Exploration of the language used by work-based route students may offer insights into the impact of diverse entry into nursing and the influence of time spent in different discourse communities. We would argue that of crucial importance is that any change in entry route or education location safeguards a high level education promoting critical, analytical thinking, questioning and advocacy.

Limitations

This study focused on nursing students from one UK University. Taylor (2003) notes that a researcher's personal reflexive identity can influence a study, especially regarding data collection. Both authors are registered nurses working within the university sector. Initial research questions were informed by personal observations of student behaviour. SJ conducted interviews while being mindful of the potential power imbalance between lecturer and student.

Member checking (Taylor 2003) enabled student participants to comment on emerging ideas at two points.

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(2) Conflict of Interest: There are no conflicts of interest.

(3) Ethical Approval: This study was approved by the Research and Ethics Committee, Northumbria University

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