



To Use a Method Without Being Ruled by It: Learning Supported by Drama in the Integration of Theory with Healthcare Practice

by Karin Dahlberg and Margaretha Ekebergh

Abstract

The study reported in this paper focused on nursing students' learning and, in particular, their integration of caring science in theory and practice. An educational model incorporating educational drama was developed for implementation in three different teaching contexts within the nursing and midwifery study programmes at a Swedish college. A central aim was to understand the dynamics of educational drama in the healthcare context and its impact on learning and teaching. Using a phenomenological approach, seventeen students and six teachers were interviewed and their experience of drama as an educational method explored.

The research findings illustrate the meaning of learning and teaching that is sensitive to students' lifeworld experiences. In order to be a successful method for closing the gap between caring science theory and practice, not only the educational drama, but teaching in general, must be anchored in the lived world of the students – that is, their experiences of health and care. While embodied reflection, as a key factor in integrating theory and practice, was shown to be well supported by educational drama, it was also found that “the method” tends too readily to take over and govern teaching and learning. The findings of this study further indicate how learning in practice and embodied reflection can be supported by the inclusion of well-chosen caring science theory to cast light on caring practice dilemmas.

Introduction

Students' learning is supported by effective pedagogy, and the integration of theory and practice is of crucial importance for professional schooling such as nursing education. There is, however, a well-known “gap” between theory and praxis within nursing education (cf. Andrews, Gidman, & Humphreys, 1998; Brasell & Vallance, 2002; Davhana-Maselesele, Tjallinks, & Norval, 2001; Ekebergh, 2001; Fealy, 1999; Gallagher, 2003; Gassner, Wotton, Clare, Hofmeyer, & Buckman, 1999; Rolfe, 1996, 1997). Students experience

difficulty both in applying theoretical knowledge in practical situations and in using scientifically based knowledge in clinical situations.

Confronting this dilemma, an innovative two-year project was embarked on in nursing education in the South-West of Sweden, called “Drama, Caring and Reflection” (DRACAR). The goal was to improve nursing students' learning and, in particular, their capacity for integrating caring science theory with their practical nursing knowledge. The aim of the project was therefore to develop a model for reflective learning with the help of educational drama,

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as well as to apply this model in the nursing programme (see Ekebergh, Lepp, & Dahlberg, 2004). The project also included an analysis of how students and teachers experienced and employed this educational method, which is the focus of this paper.

An Educational Idea in the Field of Caring

The project was inspired by the idea of uniting the best of caring science theory, healthcare practice and nursing. We saw that mutual encounters between theory and practice were needed, as it is not desirable for theory to be forced upon practice, or vice versa. We proceeded from the assumption that the embryo of learning caring science theory must come from concrete caring situations and be complemented by theoretical reflection sessions. We also wanted the learning to be patient- and lifeworld-oriented, which is the focus of caring science (cf. Dahlberg & Dahlberg, 2003). However, in healthcare, for instance in Sweden, practice more generally tends to be oriented towards patients as diagnoses, and the lifeworld as well as the everyday world of activities are often neglected. One aim was therefore to see if it was possible to modify caring science theory in such a way that it was applicable to healthcare and supported patient-oriented caring practices.

A starting point was therefore to develop a model for learning that was experience-based and that would encourage students' development of an integrative, reflective and patient-oriented attitude. We chose educational drama as the basis for our model. This form of learning seemed to make both the patient perspective and caring science knowledge visible. An aim was to let educational drama bring theoretical caring knowledge to life and provide scope for theoretical reflection on experiences emanating from caring practice (cf. Ekebergh et al., 2004). The teachers in our project were educated in the use of drama and a reflective teaching and learning approach by a licensed drama teacher with a PhD in pedagogy.

In educational drama, students work mainly with role-play and improvisations, or other group situations in which their reflections are supported (Lepp, 1998). As well as integrating theory and practice with the method of drama, the main objectives of the method included designing appropriate drama exercises to develop individuals' understanding of each other in terms of, for instance, intercultural understanding and how to handle interpersonal conflict. Learning supported by drama is related to the students' ability to work with the imaginary, that is, "as if" situations (Lepp, 1998). Besides role-play and improvisations, other examples of drama activities include creating figures, painting and using symbols or words in the

form of narratives. Drama inspires the participants to be curious, investigative and eager to understand different perspectives on a phenomenon better. In our project, the participants could work with patient perspectives as well as various carer perspectives (Ekebergh et al., 2004).

In learning that is supported by drama there is an emphasis on reflection, which is of value in relation to all kinds of knowledge development, and not least so in situations reliant on "tacit knowledge" (Bengtsson, 1993; Ekebergh, 2001; Johns, 1998; Polanyi, 1966; Schön, 1995). Drama encourages participant reflection and the distancing of oneself and one's knowledge in dialogues (or polylogues) with fellow students in a group and with a teacher (or drama leader).

We chose to build the practice of drama on a phenomenological epistemological foundation, including conceptions of the lifeworld and embodiedness (cf. Bengtsson, 1993; Dahlberg, Dahlberg, & Nyström, 2008; Husserl, 1939/1973; Merleau-Ponty, 1945/1995). The lifeworld perspective was, in this case, formed by the nursing students in caring situations, with the patients and their perspective in focus. These lived caring situations could, for example, be fictionalised for learning, reflection and cultivation, as well as be related to caring concepts and theories, all depending on the context of care. Consequently, the learning process incorporated both the teaching substance and the students' lifeworld perspective, which were integrated and developed through the use of educational drama.

Implementation of the Educational Project

The preliminary model for reflective learning with drama was developed further in a process of continuous evaluation during the on-going project (Ekebergh et al., 2004), and it was tried within three different teaching contexts in the nursing programme. Initially the education model was put into practice in a theoretical teaching setting, which is less complex than the clinical teaching setting. The students brought experiences from clinical situations to group sessions, and the starting point was the students' experiences of care, with the focus on caring relationships. The experienced caring event was reflected upon in groups and related to caring theory using drama.

After a trial period of one term, the model was evaluated and the revised model was implemented in the theoretical educational setting for the full two-year duration of the project. After evaluation, the reflective learning model was also used in two

different contexts of care. The first was an emergency care setting in which students conducted their clinical studies. In emergency care, specific demands on caring and caring relationships are made. Nursing students meet patients and relatives for a short period of time in an environment that is characterized by a high work-rate. Furthermore, a medical view dominates in this area of care, which is also characterized by the presence of high technology. This contributes to raising ethical questions that relate to the patients and their suffering.

The second care context in which the model was implemented was an educational ward, where particularly favourable learning conditions exist, insofar as all staff are highly educationally motivated. It was anticipated that, in this context, we could optimize the connection between theory and practice, and thereby improve the learning model.

From the start of the project, 48 students met in groups of eight, each group with its own teacher. The six teachers met eight times per term with two advisors. One advisor provided support in the educational subject, caring science. To these meetings the teachers could bring educational problems they had encountered in the teaching of caring science. The other advisor was a licensed drama teacher, who supported the teachers in their application of the drama method. She could, for example, teach them new drama activities that addressed the educational problems experienced.

The project, including the research, meets all the relevant ethical demands, with all the ethically required permissions and consents duly obtained.

A Phenomenological Research Approach

After two years of implementation, the project was closely studied with the overall aim of seeing how the educational model influences learning and teaching in the context of caring science and nursing education. The research study is an example of reflective lifeworld research (Dahlberg & Dahlberg, 2003, 2004; Dahlberg, 2006a, 2006b; Dahlberg et al., 2008). The approach is based mainly on the phenomenology of Husserl and Merleau-Ponty, and implies:

(i) Phenomenon Sensitive Methods

We chose to conduct open-ended interviews with both students and teachers. The interviewees were asked to describe their lived experiences of the focal phenomenon – *Learning and teaching using educational drama in nursing education*. They were encouraged to give examples that illustrated their narratives, to “tell more” and to elaborate in as much

detail as much as possible on the nuances and different aspects of their educational experiences.

The analysis of the data was aimed at describing the phenomenon’s essential meaning structure, including its variations and nuances (Dahlberg, 2006a).

(ii) “Bridling” the Researchers’ Evolving Understanding

As a phenomenological researcher, one adopts an attitude that is characterized by a will to be ruled by the phenomenon, and not by one’s pre-understanding, theories or other preconceptions. The aim is to not make indefinite meanings definite too soon, and to problematize the emerging meanings. In line with Merleau-Ponty (1945/1995), we would define “bridling” as a reflective stance that helps us “slacken” the firm intentional threads that make up the lifeworld and tie us to the world. We do not want to cut these intentional lifeworld threads off, because losing them is the same as losing meaning, to lose life; but we must, as Merleau-Ponty encourages us to do first of all, not only recognize these threads, but also try to loosen them up a little in order to give us that elbow-room that we need to see what is happening when we set out to understand phenomena and their meanings.

While practising the approach of reflective lifeworld research (RLR), we early on began using the term “bridling” as a substitute for the phenomenological term “bracketing”, which we found to be too narrow and inclined to push understanding in the wrong direction. With “bridling” we cover the same understanding as with “bracketing” in terms of adopting a critical stance towards our pre-understanding, but go further by also covering the whole process of understanding, and thereby we escape the too narrow focus on only pre-understanding (Dahlberg, 2006; Dahlberg et al., 2008).

All six teachers that participated in the project were interviewed (KD). A location outside the college was chosen, a tape-recorder was used, and the interviews were transcribed verbatim. Each interview lasted about 45 minutes. The teachers were encouraged to describe both their teaching in the project in general and teaching situations that they had found particularly important. With the lived experience in mind, the teachers were encouraged to describe their teaching, their experiences of it, and how they were affected by this kind of teaching, for example, in relation to other experiences of teaching.

Of the 48 participating students, 17 were interviewed (ME). The students were drawn from all three

educational contexts and all six groups, and intentionally represented both those who were positive and those who were negative about the project. Two of the interviewed students had cancelled their participation in the project after one semester and one year respectively. The interviews were carried out at the nursing college and each lasted between thirty minutes and one hour. The students were requested to describe positive as well as negative experiences of learning events. They were also encouraged to reflect on the importance of their learning (both positive and negative aspects) in relation to their growth and learning process, and the integration of caring science in theory and practice.

All the interviews were tape-recorded and transcribed verbatim. The analysis followed the guidelines of the RLR approach (Dahlberg et al., 2008). The transcribed interviews were analyzed for meaning, with the ultimate aim being to describe a general structure of meanings that constitute and characterize the focal phenomenon. The analysis was carried out with open-ended, "bridled" interrogative methods using the various descriptions. The process, which is characterized as both an analysis and a synthesis, can be seen as a dynamic approach to data in which one meaning temporarily emerges as a figure against the rest of the material as background. The next moment, another meaning is a figure, and the meaning that recently was a figure is now part of the background. This method enables the structure of essential meaning to emerge and be described more fully (Dahlberg, 2006a).

A goal of research of this nature is to reveal essential meanings as well as the phenomenon's many nuances and variations of meaning, and to relate the general meaning to the particular. Initially, in the outline of the findings that follows, the description of the essence of the phenomenon is presented. This thematic synthesis is intended to characterize the phenomenon in a more general way than is later on presented in the analysis of the constituent themes. The essential meanings should also be seen as a background to the particular and more individual meanings. Excerpts from the interviews illuminate the various experiences and give individual voice to the informants. Some variations are not uniquely characteristic of the phenomenon of learning and teaching with drama in nursing education, but can conceivably constitute part of another phenomenon as well. At the same time, they are important for understanding the width of the experiences of the phenomenon of study, in that they describe how this training is experienced by some students and/or teachers, and in that way they thus belong to the phenomenon's structure.

Throughout the presentation of the findings, the informants' descriptions are quoted in italics and marked with (S) for students and (T) for teachers. The Interviewer's utterances in the interview excerpts are presented in brackets.

Presentation of Research Findings

The findings of the study indicate that learning with drama means a potential for vivid learning and teaching, characterized by being sincere and intuitive as well as bodily reflective. Using creative forms, teachers and students re-enact caring events in a manifest and active way, and they elucidate the experiences with the help of caring science theory.

For such a holistic approach to work in the intended way, learning and teaching must locate its starting point in the students' lifeworld. Caring science cannot be taught or learned if it does not touch upon the lived experiences of the students and their own experiences of health and care. All pedagogical means need to be carefully chosen in relation to the learning dilemmas presented and the experiences brought to the group sessions by the students. In particular, ways have to be found to prevent "the method" or "the theory" from taking over and thereby obscuring the student's lifeworld. Teaching caring science theory therefore becomes a major balancing act, marked by the built-in impossibility of ever being sufficiently prepared. The learning side also demands balance. The students must have the courage to encounter even unfamiliar thoughts and feelings as well as their own shortcomings in caring.

Learning that includes embodied reflection seems to be better in terms of giving students enough learning space to "let be" and to "tumble around" in the lived experience and from there to progressively verbalize and conceptualize the meaning of caring phenomena. In this movement between the tangible and the abstract, theoretical caring science knowledge becomes an aid to reach a deeper understanding of the lived ambiguous experience, especially if it can come to life as in drama activities. The embodied learning, and the movement between theory and praxis, has the potential to support the integration of different sources of knowledge and the growth of knowledge that otherwise would be hard to grasp and make useful.

The process conveys a dynamic personal development, and personal thoughts and feelings are discovered which may not have been reflected upon before. Drama seems to start a process of self-understanding, an assessment of oneself, which could

be trying. Learning with drama is, however, not to be understood as a therapeutic endeavour. In this respect, caring science theory supports the educational emphasis of the endeavour. Self-understanding serves the fusion of the student's horizon of understanding with the caring science horizon. If both "method" and "theory" are handled with sensitivity to the student's lifeworld, the learning of caring science theory is embodied and reflective, abstract theoretical knowledge and concrete lived knowledge are united, and caring science can become useful for caring in practice.

The focal phenomenon, learning supported by drama in the integration of theory with healthcare practice, is further illuminated through its meaning constituents: "The student lifeworld is foundational"; "Creative activities, words and stillness"; "When the method takes over"; "The intertwining"; "Teaching attitude"; "Companionship and vulnerability in the group"; "The teachers' reflections and need of support". The analysis was meaning-oriented, and consequently both students' (S) and teachers' (T) descriptions serve to illuminate the constituents in excerpts from the interviews. However, there are meanings of the phenomenon that are closely bound to either learners' or teachers' respective realities. The constituent that describes the experience of companionship and vulnerability when working in small groups has its origin in the students' lifeworld, and the constituent that describes teachers' reflections and their need of support mirrors the teachers' lifeworld.

The Student Lifeworld is Foundational

Learning with drama essentially begins in the student's lifeworld. Students describe this approach as being in the real and lived context. With a lifeworld approach, the content of learning is close to their everyday reality, which contributes a feeling of being involved and touched. The drama activities assist in clarifying ideas, thoughts and feelings about phenomena in caring. Throughout the activities, the students live through caring events, which become intellectually accessible: "*It is great to see it in front of you, what happened and what did not happen ... then it is easier to understand*" (S). They discover new experiential nuances, of which they were previously not aware. Interactions with other carers or patients become visible and issues arise, such as how best to interact with others: "... *another person thinks differently To be able to meet people with a totally different opinion, totally different background and everything ...*" (S).

There is a striking awareness among teachers that, if their teaching is to be successful, they must begin by

meeting the students' lifeworld. They express how it became obvious to them to take the students' own experiences of health, care practice and caring science seriously. They are also aware of the parallel process: if the students are to be open to the patients' lifeworld, they need to have experienced openness towards their own lifeworlds.

Drama sessions founded in a lifeworld approach bring caring practice to life. Students can use their own lived experiences in, for example, trying to understand the experiences of others. When students participate in clinical studies, they are actually in the patient context and are part of the patients' lifeworlds. In order for this to become their own body of knowledge, they need to work through the events as if they were "here and now", and they need their lifeworld experience to be encountered and responded to in a constructive and sensitive way.

In reflective teaching with drama, there is an emphasis on openness, sensitivity and flexibility towards the various experiences that are presented. The teachers have found that they must be open to the nuances that emerge as important in the students' narratives and have to find suitable educational methods to explore the experience presented: "*You have to be very flexible and adjust to the learning situation based on what is actually there, and not just do what you had planned to do*" (T).

Teachers communicate the meaning of openness and sensitivity to the student lifeworld as a teaching attitude, as well as discussing it explicitly. A few examples: "*I found that they actually didn't like that idea and then I had to change ...*", "*The movements I had planned didn't suit according to the students ...*", "*... now I do that with a slightly slower pace*", "*I must feel how they want it this time*". One teacher summed up the lifeworld attitude by saying: "*You must develop your own sensitivity in relation to every situation*".

The lifeworld approach in teaching with drama seems to contribute to a tolerant atmosphere. The students' own everyday reality is taken seriously and consequently respect is shown to every individual. The teachers emphasize that, even if the aim is to teach caring science, they must at the same time respect the unique experience of a student, even if that implies a contradiction of what a general theory says. Moreover, sometimes it is important "not to interpret", but to leave the student experiences alone. This could also be a pedagogical strategy: by avoiding interpretation of a description, students themselves can come up with an understanding or explanation of the narrated event. The students are

encouraged to make clear what they find difficult when learning caring science. In doing this, they feel secure in that there is an agreement that whatever is said stays within the group.

The open lifeworld approach makes it easier for teachers to recognize when students require extra reflection time.

I try not to force, but to give time. That we have time for reflection, time to talk about what they need. And that each one feels that they have space, the opportunity to express their experiences, that everyone feels that it is completed. (T)

If lifeworld sensitivity works, caring science theory is able to affect the students' understanding of care. If lifeworld sensitivity works, educational drama has the potential to integrate caring science theory and caring practice.

Creative Activities, Words and Stillness

Learning with drama entails working with experiences through creative activities, which seems to expand and deepen the potential for learning caring science. The teaching challenge is to grasp the meaning of the students' experiences, which include complex feelings, thoughts, ideas and issues associated with the caring practice experience. Both students and teachers appreciate the bodily activity, for example when role-playing. It seems to be a relief for the students when they can use non-verbal ways of expressing their experiences. "*Words sometimes make you dumb*" (T). Drama says more and helps students and teachers to reach beyond words.

Students describe how the creative activities, if they are permissive and open, allow their experiences to be presented in all their complexity. They express how these activities facilitate the ability to make thoughts and feelings explicit. One student talks about a certain activity where they used objects in order to symbolize thoughts and feelings:

... you can choose different objects to exemplify thoughts ... it is easier to express thoughts then. Not all people are open and able to talk; however, most of us are able to express thoughts and so on through objects and symbols. (S)

Students claim that thoughts and feelings are experienced differently through the drama activities. Compared to straight verbal teaching, the features of their experiences become more visible and clear,

thanks to "*the use of body language*" (S). According to a student, new insights develop when other group members interpret her painting:

You do not see very much by yourself ... you just draw something. But when another person in the group explains what he/she sees, and you think, yes, that is right, but I had not thought of it in that way, then you see a big difference. (S)

The same kind of experience occurs when using these activities to bring theoretical concepts to life and give them meaning from a lived perspective. All types of caring science concepts and meanings can be brought to life in drama. The students and teachers say that the meaning of concepts such as suffering, comfort, hopelessness and illness are made explicit with the help of drama.

Role-play seems to have a high status in the field of educational drama. Teachers describe it as a goal to reach, to be able to practise role-play. It is, however, easy to understand the fascination with role-play when listening to teachers and their experiences of this particular drama method. One teacher describes a situation that she initially found difficult to handle. A student had been to a ward where he found that the carers were rude to the patients and that they avoided them instead of encountering them and their suffering. It was obviously painful for the student to express his feelings in relation to that experience, and not least difficult to describe how the carers made false excuses for not wanting to encounter the patients' suffering by arguing, for example, that the patients "*want to be by themselves*". The experience was first of all manifested in a painting exercise, after which the teacher sensed the student's pain and arranged a role-play.

And then he said that ... I saw that happen to him during the role-play, that he all of a sudden felt how he would have wanted it to be, how he could have reacted in that situation. And he said that, "Oh", he said, "this is the way it should have been, now I see, this is how I could have done". This insight could not happen just by talking. This is what I mean. [Int.: What is it then that makes this so good?] Well, it's that you try to re-live the situation and that you feel it in your whole body. More than if you just talk about the experience. The feeling is more integrated in you. (T)

Drama, for example in the form of role-play, is used most of all to support the learning of caring science,

but teachers also convey that they use drama to support students in other areas.

Sometimes students expressed their ambiguity when they realized that the sessions had a positive potential but that they could not fully grasp the concrete experience of it, due to the “*heavy and big and deep discussion*” (S). One student expresses how the group sessions with drama had no meaning for her in the beginning, but when a role-play impacted on her lifeworld it made sense to her, “*and then it felt much better*”. It seems that role-play has great potential in respect of reworking lived experiences and supports the efforts to find them meaningful.

Insights do not arise solely from activities and exercises of different kinds. The meaning of caring science could also be elicited by stillness. One teacher gives an example of when she wanted the students to use pieces of paper, pencils and crayons to illustrate the experience of ‘trust’ and ‘confirmation’ that had come up during the drama meeting. The exercise went well and they met again in a circle at the end of the meeting, to look at the drawings and paintings, and conclude the day. All of a sudden, there was a calm and sombre atmosphere in the group. The teacher describes it in this way:

... by drawing, by doing this exercise, that just this ... you are not used to expressing yourself in this way. To draw, well part of it is something unusual for us as adults, which they also said, ‘I cannot draw’, but there were no real problems with that. There is then a certain stillness to it, and then, you know, what happens and you see, that is what I feel and can tell. Then the picture is not what is difficult but it is the meaning of the picture, the reflections that it causes. And this made them ... take things seriously and they listened to each other. And that is unique, generally we don’t listen to each other in that way. (T)

Teachers convey that teaching with drama brings with it “*a new dimension*” and “*it opens new doors*”. The use of drama in teaching entails giving the teachers “*more tools*” to use in their teaching and they acquire “*new strings to their bows*” (T). They see how drama brings experiences to life, for example through the different drama exercises: “*We use our bodies, we don’t just talk*” (T). Drama makes the experience more profound, more moving, and more compelling, and the memory is made more alive. Teachers express how they have seen students re-enact memories they had thought were lost. Using drama, students move beyond time and space, and can come closer to the

original event than through talking, which enables a revision of that experience. It becomes clear from this analysis that drama provides both teachers and students with new ways of expressing themselves, of expressing caring experiences and caring theory. Drama allows more emotions and more complex experiences to be presented, and the students seem to reflect more easily than is the case with other educational experiences.

The findings also show that there is no dichotomy in the students’ or teachers’ approach to learning. On the contrary, they are aware that the drama activities must be combined with verbal dialogue, reflection and discussions in order to make their full potential of meanings and new understanding available. Both students and teachers claim that the activities are important tools that support the verbalization of caring science phenomena. Drama activities can awaken embodied nuances of meaning, and students can discover words and other formulations that better describe the actual phenomena. However, sometimes words are as good:

It is good to use drama when there are difficult situations, when it is complex, then it is great to see it in front of you, what is happening, what is not happening, but in other circumstances the dramatization gives no more than if we discuss the whole thing. (S)

Consequently, drama should be used with discretion – at the right moment, in the right place and with tact – in order to support the students’ reflection process and enable a deeper understanding of caring and caring science.

When the Method Takes Over

In the analysis of the project, we sometimes found that drama as a method had taken over despite the intention to be guided by the students’ lifeworlds and relate the various teaching methods to the caring science issues that arose. The drama practice can become a goal in itself. “*Sometimes I thought there was a little too much of the doing*”, as one teacher in the project puts it. The students who express experiences of too many activities indirectly confirm this. They describe how they thought that sometimes it felt as if the drama activity was the main thing. In a way this is reasonable. One aim of the project was to develop drama as a part of teaching, but it seems that there might have been too much of it and sometimes with greater emphasis on drama itself than on the end it was intended to serve. The focus then shifts from being oriented towards student lifeworlds or caring

science to practising drama; “the method” becomes the aim itself. When this happens, openness and sensitivity are lost.

Some students were on occasion put off or even frightened by too much drama. One teacher discusses this:

In some way I think that drama could frighten people who are not used to opening up, and maybe something happened too fast, when we wanted to follow the rules of the project. And maybe because we were beginners, we rigorously followed the rules. If that was now, I would be more careful and not do all the exercises. (T)

“The method” took over and hindered the teachers from seeing the students and their demands. A possible explanation for the method focus could be that the use of drama was new to the teachers. They convey how they felt pressured to learn the method as part of what they had committed themselves to by participating in the project. One of the teachers overcame this experience after having become aware of how the idea of drama was preoccupying her. Once one of her students brought to the group session an experience from caring practice that she wanted help with, when the teacher actively decided not to “do” anything, but to sit down and talk about the event. She took some suitable concepts from caring science theory with which she encountered the student, her narrative and her problem, and in this particular situation that was the better choice, the teacher says. The students in the group later confirmed the wisdom of her decision and said that it was a particularly good learning experience, and that they had needed to talk that time, not act.

The teachers emphasize that, in order to use drama effectively, they must be confident with the method and familiar with many drama activities. The teachers in this project have been trained in drama, but not all of them express confidence in their drama competence. They are aware of the importance of establishing a good working climate in their groups, if drama is to work, and that both students and teachers must feel no pressure to achieve or “produce” (T). They also know that they have to have “many drama exercises on their agenda” in order to use the right one at the right time, even if they also have their “favourites”. One such favourite is role-play.

Intertwinings

One teaching and learning aim of the project was to support the students in integrating caring science

theory with caring practice. It becomes obvious from the analysis that integration is not about theory being integrated into practice, or practice being integrated into theory, but rather about the intertwining of theory and practice. Theory and practice are each other’s figures and backgrounds. When teachers describe theoretical debates, the context of caring practice is always implied. When they discuss caring practice issues, they relate to caring science theory. The medium for making this explicit is reflective learning with drama.

From the teachers’ perspective, it is especially clear how intertwining is facilitated by the drama elements in their teaching:

As I see it, you cannot learn caring science theory from paper work, just by writing and reading and then being examined. There must be another source of knowledge to make something happen within you. I don’t think you become a good nurse without anything happening within you. How can I, for one, encounter another person if I have not first of all encountered myself? And I might not even know what encountering means. Something must happen. And not just a little, it has to happen so that one can feel it. (T)

The ethical dimension of care highlights the need to find effective pedagogical ways of illustrating and integrating theory with practice. Drama works well here, according to the teachers, who maintain that a greater understanding is gained by the fact that drama enables complex phenomena to be dealt with from more than one perspective.

Not least important, then, is the embodied perspective, which makes caring science “real” and alive. The students in our project describe that they have been able to develop more concrete understanding of abstract theories, structures and concepts. They experience that there is an actual reality and something useful for practice beyond the abstract ideas. Their lifeworlds meet caring science and they feel that their knowledge is embodied:

... you really get this feeling of caring science in your body. (S)

Theoretical concepts, consequently, obtain a meaning in relation to the students’ lifeworld when they have become embodied. Concepts become concrete and familiar in the students’ own language, and, with that, understanding can occur:

... it is not only a concept on the wall, but it is there in the actual reality. I am now able to put other words to the concepts, more than I was able to do when I learned them. Then I could just rattle off those concepts (S)

From this horizon of learning, students develop the ability to use caring science concepts to understand and describe phenomena of caring practice.

Students practise and test different meanings of caring science concepts and phenomena in the group sessions that include drama based on their lived experiences. During drama exercises, including verbal reflections, they develop their understanding and formulate arguments with which they can articulate a theoretical caring science idea, such as “the patient perspective”, in different caring contexts. The students maintain that such theoretical terminology, when it is intertwined with their lifeworld, provides a platform for them to work from. They say that it is important, because they need to have the courage to assert and defend their opinions and beliefs when they are in different clinical contexts, both during and after their training.

Intertwining is supported by conscious and embodied reflections. The students are encouraged to step out of an un-reflected and taken-for-granted attitude and instead to use caring science and act in a more reflective, and not least self-reflective, way. The students express this condition as “pondering over oneself” or “seeing myself”. One student clarifies this:

“I think this is a matter of daring to reach the inner of myself, to see myself in thoughts and in reflections.” (S)

Not only one’s own thoughts and other embodied experiences, but also activities that make other group members’ experiences explicit, have the potential to increase self-reflection on the part of the students participating. In both inner and external dialogues, students discover feelings and thoughts of which they were not aware. These insights might cause surprise, as well as be painful experiences:

... you must dare to meet your weaknesses and feelings and be able to challenge these feelings. If you are not able to do that, you cannot understand what this training might give you, and instead you give priority to other things in the training. (S)

The student quoted above told how she had seen that

those who were not able to handle self-reflection in a creative way might distance themselves from the potential of learning with drama.

Active self-reflection clarifies the learning process and the growth of the students as individuals, as was pointed to in various interviews. Students describe how they have become aware of particular events and movements. One student describes how she could confidently handle the subjective experience of “groping in the darkness”, because she had developed an ability to “see the light in the tunnel”. She expresses how the drama group sessions helped her to become aware of her learning and development in a new way, which strengthened her self-confidence.

The growing process involves the students as human beings in a total life context, which means that the person and the professional role cannot be separated. Learning with drama becomes a meaningful support in this life-growing process *if* it confirms the students’ lifeworld.

The learning process is especially supported in drama sessions when the students work with different types of activities, with the purpose of seeing, listening, feeling, practising, testing and experiencing what it is like to be in the concrete caring context: “as it is here and now”. After working with drama, they are more open to appropriately conceptualizing the substance of their experiences with the help of conscious reflection:

The best of all is afterwards... it is not the role-play, but that we sit down and reflect and discuss, what we did and what came out of the role-play, was it something new? We can ask questions – what happened? what was shown? how was it? and so on. And from that point we go on and tell more of our experiences from similar situations and make comparisons. (S)

Active reflection involves distancing oneself momentarily from the lived experience, and caring science theory is used as a tool to understand the caring experience at a deeper level. Reflection often takes place during a discussion at the end of a drama session, and, from the students’ perspective, this part of the session involves integration of theory and practice. With the help of questions such as “What have you learned today?” their earlier experiences are deepened and their knowledge clearly increased. Students in our study stress that this learning phase is the most important. The students also emphasize the importance of “turning back” to their base of values

and mirroring thoughts and actions through questions such as: How did I act? What should I have done? What was best for the patient? In this way, they develop practical knowledge as well as an ethical awareness.

The students' self-reflection seems to support a parallel process of which the teachers are also aware and sometimes consciously model by encountering the students in the ways they want the students as carers to encounter their patients. The teachers maintain that positive, critical and educational encounters between teachers and students provide insights that can be put into practice in encounters between students/carers and patients. Students' emotions that are awoken during teaching with drama can be discussed in relation to caring encounters they have had or might face in the future.

One example of an educational parallel process emerged in a teaching situation where 'vulnerability' was in focus. The students began to discuss their own vulnerability as students while trying to understand the patients' vulnerability in healthcare. Caring science theory on vulnerability was included and drama activities were used to intertwine theory and practice. One teacher describes the situation: "*They worked with this [the experience of vulnerability] wholeheartedly, and they showed how the patients might feel*" (T). Understanding one's own feelings of vulnerability might make it easier to understand others' experience of vulnerability.

Teaching Attitude

What emerged from the interviews with both the teachers and, in particular, the students, is that teaching attitudes and teacher roles are of crucial importance in respect of the outcomes of teaching and learning encounters. Teachers create the conditions for learning by providing the foundation for interaction and building the atmosphere in the group. Caring science is made alive in teaching that meets the students' need for support in the integrative and reflective process.

Teachers must be distinctive in their role as group leaders and be able to guide the group in a sensitive way. This requires balancing the need for structure and the need for openness to the unexpected. One teacher describes how she on one occasion was waiting for a colleague to arrive with some pictures they were to use in teaching. The colleague had, however, mistaken the time and was not there, but instead another person came to hang some paintings to decorate the room, and, within seconds, the teacher found a new focus for her meeting with the students:

"Well yes, there were these paintings. We used the motifs, we had only these motifs, and that worked very well!" (T). With the help of these unexpected paintings, the teacher could illustrate suffering and well-being, and the result was a discussion prompting many insights. Moreover, one student, who earlier had not been very positively inclined towards caring science and the teaching process, found the flexibility appealing and became interested in the whole idea of learning caring science. According to the teacher, this student learned how to express herself in terms of caring science at this meeting and found it valuable.

Teachers create the fundamental approach, which then influences the atmosphere in the group. They can exemplify the meaning of a caring science perspective and a lifeworld approach by their own actions. Students emphasize that a good teacher is involved and prepared and even shows a genuine interest in keeping the group together: "*She has been tremendous. She has been ambitious, involved and very prepared. You could see that she thought this was fun. This was felt in the group and we had a great feeling of unity*" (S).

From the students' perspective, it seems important to have a good relationship with the teacher. They wish to meet the teacher on a natural and uncomplicated level, where the teacher invites the students into a comfortable and trusting relationship, in which they can share their insecurities and uncertainties. One student says:

The teacher showed with her actions that there was nothing special about drawing or painting. She was very calm and really took care of what happened. You experienced that she simply inspired confidence. I cannot put this into words, but it is something with her that makes it easy for you to talk and act. (S)

The significance of the teachers' attitude can also manifest itself in a negative way. The students appreciate their peers' support, but they also need the teachers' support, which is founded in more extensive professional experience. One student perceived their teacher's role as unclear, with reflection not promoted by the teacher's withholding in class of the benefit of her more experienced point of view: "*I lacked support from the teacher. We students talked and discussed the whole time. I wanted to have an experienced nurse or teacher's view of these things*" (S).

It is also regarded as important that teachers are attentive to everyone in their groups and do not

favour anyone.

According to the students, teachers must utilize drama with tact if it is to enrich the students' learning and development process. In this regard, they recognize that their teachers' roles differ from those of regular teachers:

... she is very good because she listens and she follows what turns up in the group. She does not go straight ahead with her own programme, as all other teachers, which they certainly must do. It is so comfortable to have a peaceful space here. (S)

In more than one way, the key factor seems to be the ability to encounter the students' lifeworld. Not least important is that teachers have the ability to promote reflection on students' experiences and bring the substance of caring science into the picture. In this way, the teacher is the link between the students' lifeworld and caring science. However, teachers emphasize how ambiguous the required teaching is. Most of all, they express their own shortcomings in relation to caring science as an obstacle, and discuss the relatively short history of caring science and the lack of consensus in caring science theory and concepts. They suggest that these shortcomings could be a reason for the gap between caring science in theory and in clinical practice.

Companionship and Vulnerability in the Group

The group plays an important role in learning with drama. Within the group, students find others' experiences that they can relate to, which strengthens their self-confidence. The group is also used as a mirror in which the students become aware of how others perceive them.

To be aware of how other students look at me and you try to deal with it without feeling vulnerable, // ... you might make faces or have strange expressions, when you are talking to other persons, but you are not aware of it. It might be good to become aware of that. (S)

The atmosphere in the learning group is characterized by "being in the same boat" (S), which creates a sense of companionship. When students share their experiences and receive the others' narratives, both similarities and differences of thoughts and feelings become apparent, which increases the students' horizons of understanding and creates awareness of the subjectivity of the lifeworld. The ability to "see the other" (S) is thus developed further.

This provides an opportunity for students to relate their insights to the patients' situation. One student illustrates the importance of getting to know and make contact with persons that s/he experiences as different from her/himself:

... some in the group, I disliked in the beginning and I would never have contacted them on my own outside the group. But when I got to know them better in the group, I realized that they were actually okay. I have learned that people are not always as they are on the surface, they might maintain a certain attitude, but when they are in a small group they feel confident and let that attitude go. (S)

Overall, the interviews convey how differences between them have enriched the students' understanding of others. There is, however, a strong emphasis on the feeling of companionship in the group, which is strengthened in a secure and comfortable atmosphere. The ideal situation is when students even dare to show their lack of self-confidence, which requires an atmosphere in which they are unreserved and can trust each other. According to the students, a good climate is encouraged by having a consenting approach and being involved. They are aware that they receive more if they dare to show their own feelings and thoughts. One student says: "I reflect more and I am more open because I realize that I get more back and learn more. I want to get more and more understanding of human beings and that is also to get to know oneself."

The secure atmosphere in the group forms a counterbalance to the experiences of loneliness and insecurity in the clinical context. The students also describe stress and insecurity in other teaching situations, due to differing demands made on them and having to achieve good results in their studies. In learning with drama, there is not that kind of obligation, and students perceive the drama sessions as being just for them, aimed at their process of development.

Participating in learning involves also having responsibility for "the other". This is expressed in a respectful attitude towards the group members. It could, for example, involve listening to the others in a sensitive way and encouraging someone in the group to talk about her/his experience, even if it seems to be less important for the others. It is also to give space to somebody to express his or her needs. A prerequisite for genuine participation in the group is a feeling of sharing the context, which requires experiences that

are appropriate for the drama session. It was thus found, for example, that students with more experience of caring dominated over those with less experience.

Learning with drama in a group also entails being vulnerable. A feeling of fear and anxiety occurs when one discloses more than one would want to. Students can become exposed to thoughts and feelings that they do not feel ready for:

... then I was to sit down and draw the feeling and after that we hung up our drawings on the wall and I had to explain what I had drawn, and I think that is to be very exposed. // ... to make a drawing is not just a few lines, it is also colours and everything ... and what is coming up then? Maybe I cannot choose what appears, as I choose my words, when I am telling something. (S)

The above comment illustrates students' experiences of not having full control of what they want to share and convey of themselves to the group members.

Drama activities are basically a form of performance, according to the students. They manifest, for example, a feeling by painting or acting in a role-play. The performance is presented in the group and the individual student is the focus of attention. This is sometimes experienced as being exposed in an uncomfortable way. In particular, the students highlighted the introductory activities (exercises for getting to know each other in the group) as especially trying in this sense. Paradoxically, the actual purpose of these activities is to create security and confidence among the students. The idea is that the learning environment must be a "safe space" in order for students to be able to express personal experiences, develop a feeling of trust and accept each other's differences. In such a safe space students should feel free to risk sharing their lived experiences, ideas and opinions, but in the interviews the students disclose experiences that indicate the opposite:

... it was very difficult at the beginning to find out what you should say when you were standing there and all the group members were staring at you. You had to figure out what to say before you were in the situation. (S)

It is hard to be the centre of attention, you feel as though you're shaking as well as all the other feelings that can appear in that sort of situation. (S)

Consequently, the students were critical of drama exercises of this kind, and they questioned the value and meaning of these, as is illustrated by the following two comments:

I got a feeling that we did those drama exercises because we had to, without any meaningful goal. (S)

The teacher had planned a certain amount of activities that we should go through It would have been better if the teaching was less rigid, and more flexible in allowing us to present what we needed. (S)

Another consequence of representing a situation was that it requires hard work to envisage and enact the role in the role-play. According to the students, they needed to be very focused on what to say and how to act in an appropriate way. The students claim that there is a risk that the intention with the role-play might be obscured or lost to them.

Besides these comments, role-play is perceived as a drama activity that is meaningful and motivates the students, as mentioned above. However, the analysis shows that, in order for the role-play to work as intended, it must be based on lived experiences and preferably also relate to caring science. If the role-play meets the students' need for support in their personal development and in their learning process, it is recognized as something they can benefit from and that helps them to reach new insights.

It is further evident from the interviews that, while it is seen as possible to deal with the students' vulnerability in the drama groups, this seems to be a challenge. The students must themselves choose to work with their feelings of being exposed and try to develop the courage to be the centre of attention. A sensitive teacher or group leader must support them in this process. If it works, it can be an experience they can use as preparation for their future work as nurses.

Teachers' Reflections and Need of Support

Our analysis of the data shows that teachers cannot omit any of the main elements of their teaching – to meet the student's lifeworld, to integrate caring science and practice, and reflective teaching with drama – but must combine all three, it being evident that, when they run into problems during teaching, it is generally because they have missed one or two elements. In addition, they must take on the crucial role of being group leaders, which requires certain personal qualities and a high level of sensitivity.

Firstly, the analysis indicates that teachers meet these demands in a creative way. The interviews with the teachers are characterised by extensive reflection. The interviewees ponder upon their experiences, how they were, what happened, and how certain experiences came about. They discuss their ideas repeatedly during the interviews and try to see things in different ways. They make an effort to see different aspects of their teaching. It is obvious how they struggle to find the right words to describe their endeavours, and, as the interviews progress, they try hard to find new nuances to discriminate experiences from each other. They make statements and opinions that they change the next minute in order to articulate the experience they want to express more aptly. Self-reflection is of importance: "... I evaluate myself, I take notes ..." (T). The teachers seem to easily scrutinize their own teaching efforts and alternative ideas about the best way of making caring science theory meet caring practice. There are no rights or wrongs apart from the point of departure in the students' lifeworld, which they emphasize.

However, to succeed in this occasionally difficult endeavour, teachers also need support. Throughout the project, provision was made, in the course of their supervision sessions, for teachers to come with their own questions, with their loose threads, for these to be woven together into a strong fabric.

During the project, the teachers participated in two groups for supervision and training. In one group, they could present questions concerning aspects of caring science that they found difficult to deal with. In the other group, they also dealt with caring science, but the main focus was the practice of drama. Teachers describe how they were strengthened by their participation in these groups where they could reflect on their teaching and have their competence nurtured. They convey in the interviews that this has contributed to their development as teachers in caring science, as is illustrated by the following two excerpts:

I think I am pretty closed as a person and thus the "main supervision" has made me more open to the world, to people around me. This is something you get through life experience but the "main supervision" gave me a boost, so that I have appreciated all our meetings. // Well, of course that was not the main purpose of the DRACAR project, to support the teachers, but I experience myself as more able now. (T)

I have made enormous progress in relation

to my own personal growth. That is how I feel about the whole thing. I have developed. I see new abilities within myself that I didn't know about. (T)

They also relate their own development to that of the students:

I have evolved as a human. That is fantastic. And this is what I think happens with the students. A student said that the other day, that it is really this, that they have come to know themselves better. And you kind of reflect on that, that you have gone through the same thing as the students, that same development that I want them to attain, that is the aim, right, to develop. Both as a professional and as a human. (T)

Not only their instructors have been important to the teachers and their own development, but also their colleagues in the project. During one interview, the teacher burst out with the following answer to the question as to what has been most important to her during the two-year project:

I might disappoint the DRACAR management now by saying that the very best has been the meetings with my peers! A sense of companionship has developed and we have got to know each other in such a different and greater way than all the years before. (T)

According to the interviewees, the combination of peers meeting together under the leadership of two experienced and professional instructors in caring science and drama has been particularly good. This is what they will miss when the project is finally over. They say, however, that, even if the project comes to an end, they will not stop meeting. They have already begun to meet in informal groups in between the formal meetings, and this is something they will not give up.

The teachers' appreciation of their own supervision is significant. It points to the great need on the part of teachers both for personal development and to be personally met in the teaching endeavour. Teachers are not only professionals, but also individuals. Interviews with them convey that it is very much a case of daring: daring to let go of control, daring to change and develop. This is hard without support. What the teachers say about their need for supervision is also a judgement of the teachers' world. The everyday world of teachers seems mainly to lack peer support and/or professional guidance.

The groups and instructors are especially important when there are problems with the students. In the course of the project, there were situations that the teachers just did not know how to handle. Sometimes there were situations where the powerful drama brought students too close to their own feelings and they made discoveries that they found hard and painful to deal with. There could also be problems with the drama method, which was new to the teachers and demanded practice. These and other instances are conveyed by the teachers as examples of when the main supervision and meetings with peers were of particularly great value.

Concluding Remarks

Reflective teaching and learning with drama in nursing education comprises three essential elements:

- the *lifeworld approach*, i.e. starting in the students' lifeworld and their lived experiences of health, care and learning,
- the *caring science approach*, i.e. using caring science theory as a framework for understanding, and at the same time problematizing the taken-for-granted view of, caring practice,
- the *drama approach*, i.e. employing an educational method that goes beyond given time and space and involves the subjective and lived body in reflective learning.

Teaching and learning with drama entails recognizing that caring science in theory and caring science in clinical practice never are, and never can be, separate phenomena. When teaching and learning focus on caring science theory, it becomes a "figure", and caring practice is always there as a context, as the "background". The converse applies when, for example, a student reports on an event from caring practice; the meaning of this event is always mirrored against caring science theory. It would be ideal for students learning caring science to be encountered by teachers with a thorough grounding in the subject matter of the discipline and a wide repertoire of teaching skills and methods to draw on, such as a range of educational drama techniques, to cater for every unique event in clinical caring science education. Last, but not least, the emphasis must be on the lifeworld. Every educational method falls apart without a lifeworld perspective as the foundation.

From our project, we can conclude that learning supported by drama in the integration of theory with healthcare practice can be effectively grounded in phenomenology. It is probably possible to proceed from a lifeworld perspective without an explicit

foundation of phenomenology. However, in our experience, the phenomenological framework served as a stabilizing factor that supported the project without being restrictive or limiting. In this case, nursing students in caring situations with patients and their perspective in focus constituted the lifeworld perspective. These lived caring situations can, for example, be fictionalised for learning, reflection and cultivation, as well as be related to caring concepts and theories, all depending on the context of care. Consequently, the learning process incorporates both the teaching substance and the students' lifeworld perspective, which are integrated and developed by means of educational drama. When we ran into pedagogical problems, phenomenology served with its ideas on the lifeworld, and also with its notions of perception and intentionality (cf. Dahlberg et al., 2008).

Students provide a rich picture of the meaning of learning with drama, which seems to be of particular importance with regard to students' integration of theoretical and practical caring science. Caring science knowledge comes alive with the help of drama, instead of being a strange and silent "lump of knowledge" which the students otherwise complain about and leave "on a shelf" (cf. Ekebergh, 2001). Accordingly, learning with drama seems to be a successful way to reduce the gap between caring science in theory and in practice.

Our findings confirm the view of Gallagher (2003) on learning as an inseparable and continuously evolving discourse between thoughts, experiences and actions. The gap is artificial; the learning process cannot be divided, but is a holistic process – that is, embodied learning. We can also relate our findings to those of van 't Hooft (2001), who argues that starting the learning process in the students' own experiences facilitates the theory-practice connection.

The benefits seem to be that experiences are relived, and theoretical knowledge becomes lived, by seeing, listening, feeling, relating and practising, as well as testing and trying. Different alternative expressions of caring phenomena are possible with drama. During this process, nuances and variations of the presented caring content are created in relation to the student's horizon of understanding. A new pattern of meaning occurs and new knowledge is developed.

This learning endeavour is, from the students' perspective, a movement between the well-known and the unknown. The students are to learn caring science, which may seem to be abstract and different. Furthermore, they should get to know a practical field, which is not always congruent with the ideals of

caring science. To enter unknown areas is a prerequisite for learning, about that there is no doubt. At the same time, it is obvious that this condition might create insecurity, anxiety, and fear, as is confirmed by the findings of this study. Students take a risk in showing and encountering previously unknown dimensions of themselves (cf. Williams, 2000). Courage is necessary if growth is to occur. The responsibility, however, cannot lie only with the students. Learning with drama requires, according to our findings, good teachers.

Teachers have to be equilibrists, balancing on a tight rope that connects the three approaches of lifeworld, caring science and drama pedagogy. Their own support structure, in the form of group meetings with peers and their instructors (supervisors), is thus of crucial importance. Ideally, all their needs should be met by the same supervisor. Our experience from the project indicates that all instructors must know caring science, as that is the substance of nursing. In our project, the drama instructor focused exclusively on teaching drama while another instructor dealt with caring science issues. This sometimes became an obstacle for the teachers, in that they had to make the connections between caring science and the use of drama for themselves.

Teachers in the DRACAR project were affected by the drama they taught. Their encounters with the students during the drama sessions seemed to contribute to their own development, as teachers as well as individuals. Their sensitivity to the needs of the students seemed to increase when drama was involved, and they also learned how to be flexible in their use of different pedagogical tools. Descriptions from teachers convey how important it is that there is an open learning dialogue, with the students' lifeworld and the caring science substance in focus. In such an educational context, educational drama can find its right place, and support the students' reflection and learning.

There is no doubt that drama is an important tool in teaching/learning caring science in nursing education, but our experience from the project is that it can take over and preoccupy the teachers in a less beneficial way. In all scientific areas, there is a partiality for method, which is supposed to guarantee objectivity, order, and a systematic approach. Gadamer (1960/1989) warns against this "naive faith in method" (p. 358). He argues that intersubjective communication should, instead, be directed by, firstly, an honest wish to be open to each other. Further, he strongly argues that intersubjective communication is to be led by the subject matter. This is exactly what was revealed in the DRACAR project. There was an aim to be led by

the subject matter, the learning of caring science, but sometimes teachers became preoccupied by the practice of drama as method, which was allowed to take over.

Within educational drama, there is a great belief in the creative power of the drama exercises, as is confirmed by our study. Our findings, however, also point out that an exaggerated belief in its supremacy might be precarious. In the interviews, students explain how they were sometimes "tired of" drama, and instead wanted to "just talk". Sensitive and experienced teachers, proceeding from a lifeworld perspective on learning, will, however, monitor this risk.

Allowing drama to take over could, of course, be due to the teachers' lack of experience of drama, and perhaps this problem decreases as they become more accustomed to the activity. According to McAlpine and Weston (2000), teachers need to have both experience and knowledge to be able to reflect on their pedagogical strategies and to monitor their teaching to support the students' learning. They argue that a conscious approach, founded on experience-based knowledge about teaching and learning, is a prerequisite for teachers to become flexible and willing to take risks by moving beyond the original pre-class plans. Translating this notion to teaching with drama suggests that teachers become more skilful over time, by turning their experiences of drama supervision into knowledge about learning, with the help of reflection. This enables them to improve their reflective ability on their drama activities in a supervision session and consequently to be more open to the students' individual needs and understanding, instead of merely monitoring the drama method (cf. van Manen, 1993).

However, the tendency to over-emphasize "the method" might be a more general problem, which also appears in relation to other educational strategies, such as reflection. During the last decades, reflection has been recognized and used as a technique or method in the educational area. Diary writing, critical incidents and action learning groups are examples of pedagogical models that use critical reflection as a tool for learning. None of these models, however, seems to support learning in a sufficient way. Obstacles to expressing experiences in diary writings relate to a lack of writing skills, inadequate expressive skills, or the inability to confront comfortable assumptions, which lead to obstructing instead of facilitating learning (Heath, 1998; Wellington, 1996). Experiences of using critical incidents show that students do not evolve in their ability to reflect and do not form new understanding. The critical reflection

may sometimes end up in ambiguous and unclear learning for some students (Hunt, 1996). Action learning groups (Graham, 1995) have the potential to help the students to associate, integrate, validate and appropriate new meanings produced by experiences. However, reflection skills used in the classroom do not always correlate with performance in the praxis field or with the student's praxis reality (Lee & Sabatino, 1998). Stein (2005) is critical of the emphasis on teaching critical reflection and has come to the conclusion that the use of critical reflection has more success in the classroom than in clinical practice.

Having noted the criticisms and reservations, we can nevertheless conclude that, in general, the practice of drama and reflection seems to be an important tool for students' learning of caring science. There are also other reports of findings similar to our own (cf. Avis & Freshwater, 2006; O'Callaghan, 2005). Critical reflection is shown as one aspect of a solid foundation for knowledge development, and something that includes personal learning and development. Crowe and O'Malley (2006) would endorse this statement by pointing to developments in the teaching of critical reflection skills to nursing students. Furthermore, experiential learning has been developed and studied in the context of nursing training (Welch, Jeffries, Lyon, Boland, & Backer, 2001), with the findings indicating that experiential learning strengthens analytical skills and a more holistic approach to care. Reflection is seen as an invaluable part of experiential learning, and, according to these findings, encouragement of reflection helps students to identify what they have learned.

As we have touched upon above, it is commonly considered that reflection is a tool for turning experiences into learning and knowledge (Johns, 1998; McAlpine & Weston, 2000; Schön, 1995; Zeichner, 1994), and that reflection can, for example, be practised in action (cf. Schön, 1995). This seems to be an over-simplified notion of how learners acquire knowledge, and perhaps this problem can help us see a pattern in the seemingly contradictory views on reflection. The DRACAR project demonstrates the importance of a theoretical framework that serves as a background or foundation for the reflection of lived experiences. The theoretical caring science ideas and concepts are tools with which to organize both the experiences and reflections, and that thus encourage the learning of how to effectuate good care and support patients' well-being. The project also shows that students sometimes must withdraw from the activities and sit down and then be supported to reflect upon their experiences. This understanding was shown early on by van Manen (1990), who

argues that it is not possible to experience something whilst reflecting on the experience: "our anger dissipates as soon as we try to analyze it whilst experiencing the anger". Consequently, reflection is not possible *in* action, but only *upon* action. This has implications for student learning in vocational, practice-based programmes. It means, for example, that, after being involved in an activity, it may be desirable to reflect on the experience in order to gain a deeper understanding of a specific situation. Van Manen (1977) was also one of the scholars who early on recognized the importance of reflection. The normal attitude for professionals in their daily work is, according to van Manen, mostly characterized by routines. The practice meanings and activities are "taken for granted" and lack a critical stance. However, with an open-minded attitude, teachers are able to see the "otherness" in every teaching situation, which is a prerequisite when challenging learners' pre-understanding. In this way, teachers become aware of the world of others, both patients' and students', which affects caring as well as learning activities in the caring context. This includes a developed self-understanding, which enables an understanding of reality, and that is not the same as "to know" (van Manen, 1977).

Reflection can be interpreted as playing a central role in learning, supporting a holistic view of learning by linking lifeworld, theory and practice together. There are other studies pointing to the practice of reflection models that are based on theoretical concepts from a nursing theory – for example, Parse's Theory of Human Becoming (1981, 1998) – and the adherent teaching-learning process. The purpose of the studies was to illustrate how nursing students develop an understanding of the meanings of theoretical concepts, and how they interweave them with practice, with the purpose of reaching a deeper understanding of caring (Mitchell, 2002). In one study, the focus was on learning through the patients and lived knowledge, in order to deepen the meaning of caring concepts (Milton, 2003). A reflective journaling process was also developed from this theory-based perspective, which provides for a self-critical process that enhances personal growth (Letcher & Yancey, 2004).

In addition to the above, we want to emphasize that students must be given enough scope for embodied reflection on their experiences, the knowledge that is in play, and their learning. No teaching session should pass without room for reflection. However, an essential conclusion that can be drawn from the above is that, if the emphasis is on applying a teaching method without enough concern for the student's perspective in the learning process, the educational

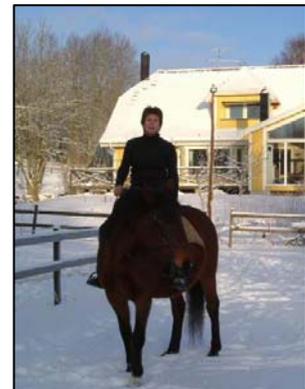
strategies have little influence on the learning, even if the method should have the potential to support learning. The individual student's lifeworld can thus be seen as the basis of learning (cf. Bengtsson, 2005; Ekebergh, 2001; van Manen, 1993; Wenestam, 1997). Every teacher must be open and sensitive to the unique lifeworld that each student expresses if the teaching and learning of caring science is to be successful. There is no method that can supersede the importance of lifeworld sensitive approaches.

Lifeworld- and substance-oriented learning with

drama is a powerful but, at the same time, demanding activity to participate in. It requires that both teachers and students are willing to invest "a little extra". Teachers must accept themselves as learners. Students cannot only learn for the tests, for the grades. They cannot choose any short cuts in the learning of caring science. Both students and teachers have to invest more than usual, but they also acquire more in response to learning and teaching of this nature. If they take this risk, they get to know themselves and they grow as individuals, at the same time as their understanding of caring science grows.

About the Authors

Karin Dahlberg (RN, EdD, PhD) is professor and scientific leader of the Centre for Lifeworld Research (LIFE) in the School of Health Sciences and Social Work at Växjö University, Sweden. With a foundation in continental philosophy and phenomenology, LIFE focuses on existential aspects of health, suffering and well-being. A main focus of Prof Dahlberg's research is on epistemological and methodological aspects of human science and health science. This research interest has been the focus of several publications in accredited international journals, as well as of a chapter in P. D. Ashworth & M. C. Chung (Eds.), *Phenomenology and Psychological Science: Historical and Philosophical Perspectives* (New York: Springer) and a book, *Reflective Lifeworld Research*, co-authored by K. Dahlberg, H. Dahlberg and M. Nyström, the 2nd edition of which was published in 2008 (Lund: Studentlitteratur). Professor Dahlberg is frequently invited to present lectures, courses and workshops on Reflective Lifeworld Research in Europe as well as in the USA.



Margaretha Ekebergh (RN, EdD, PhD) is an Associate Professor in the School of Health Sciences and Social Work at Växjö University, Sweden. In addition to being responsible for the doctoral programme in caring science, focusing on Lifeworld-led Care and Health, she also heads the unit for Lifeworld-led Education within Caring Science Didactics, where her focus is on the process of intertwining caring theory and caring praxis with the learner's lifeworld. Prof Ekebergh's current research revolves around studies of an innovative nature aimed at testing and further developing a model for learning support in the caring science context. This research encompasses studies of different didactic ideas and strategies for the learning process of caring science in theory and praxis, as well as of how caring science theory becomes visible in approach, language and actions in the practical caring context.

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