The power of affective learning strategies on social justice development in nursing education

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Abstract

Nursing professional values are critical for the practice of nurses, yet the development of curricula fundamentally supporting these values has been slow to develop. The question remains as to the best teaching strategies that foster the integration of these core values as a key focus for nurses throughout their professional practice. The purpose of this article is to report the findings of a research project related to an affective learning strategy, and the potential of such strategies to guide undergraduate nursing students in the development of professionalism. While conducting a study related to the use of poverty simulation and the attitudes of nursing students, participants provided compelling narratives highlighting a greater understanding of the constructs of social justice; a potentially more profound purpose for this pedagogical strategy. Focus group narratives revealed themes focusing on the concepts of professional nursing values, specifically social justice. The themes included: The American Dream Isn’t for Everyone, Trapped in my Own Life, Completely out of Control, and It’s Just Not Enough. Findings showed that participants experienced grave realizations regarding not only the experience of poverty, but of the widespread social norms that contribute to injustices for a vast population in our society. This research contributes to the body of literature regarding the use of affective learning strategies as an effective way to teach nursing professional values, such as social justice, to enhance nursing graduates’ ability to integrate these values in their own practice.

Key Words: Nursing undergraduate curriculum, Nursing professional values, Social justice, Affective learning strategies

1 Introduction

In order to adequately prepare the nursing workforce of tomorrow, educators must be dedicated to the importance of emphasizing social justice as a value for graduates entering our profession. The AACN Baccalaureate Essentials endorse altruism, autonomy, human dignity, integrity, and social justice as the essential nursing values that “epitomize the caring, professional nurse”.[1] There currently exists a lack of information in the literature that establishes best practice for educational strategies that effectively integrate nursing professional values into nursing curriculum. The purpose of this article is to report the qualitative findings of a research project related to an affective learning strategy. While conducting a study evaluating the effectiveness of poverty simulation and the attitudes about poverty held by nursing students, reflections and insights during focus groups and participant observations provided compelling narratives that highlighted a greater understanding of the constructs of social justice; a potentially more profound and unanticipated outcome of this pedagogical strategy. These students’ voices subsequently prompted a modification to the current curriculum to integrate affective learning strategies in an attempt to address the professional value of social justice. The goal of this curricular shift is to move beyond...
knowledge and comprehension of social justice with the intent to foster reflection, insight and action as a professional nurse.

Within the past decade, research has evaluated the integration of professional nursing values, including social justice, in higher education and reports professional excellence cannot be achieved without a strong foundation of professional values.[5] Prior literature identified gaps in nursing curriculum related to nursing values and the manner in which this content is being addressed in baccalaureate nursing programs.[3] Although the concept of social justice is found in the learning objectives of many undergraduate nursing courses, the concern remains that students are unable to integrate this concept when they transition to professional practice. It is insufficient to rely on lecture-based teaching methods to impart the gravity of social justice to nursing students; alternative pedagogical methods are necessary to ensure students enter the professional world equipped with professional values to manage a myriad of challenges in the healthcare environment.

As the demographic landscape of our society has changed, it becomes increasingly important that nurses are educated with the necessary skills and competencies to care for a heterogeneous population. Nurses are challenged daily to care for patients from diverse backgrounds. They will encounter patient diversity reflected in age, gender, sexual orientation, cultural and ethnic variations as well as socioeconomic status, each with unique values, beliefs and practices. It is essential to set aside personal values and beliefs in order to provide equitable and respectful care to all patients despite differences. Current nursing curriculum lacks the ability to cultivate social justice as a professional standard of nursing.[4] Therefore, varied, interactive pedagogy must be developed in order to ensure that nurses are equipped to recognize systemic barriers within healthcare and advocate on behalf of vulnerable aggregates.

### Review of literature

The definition of the following terms serve as the foundation of this literature review: professional nursing values, with a focus on social justice, and affective learning. It is these concepts that guide this research endeavor and provide necessary guidance from which future nursing curriculum can be developed.

Professional nursing values are the driving force behind the ethical actions of nurses within practice. Without a clearly defined set of values, new graduates enter the ambiguous world of healthcare ill-equipped to face ethical dilemmas and advocate for the well-being of patients. Under the guidance of the AACN Baccalaureate Essentials, nurse educators have created undergraduate curriculum to address the core professional nursing values. Past research has evaluated the way in which nursing education has integrated these values and found deficits in curricula[2] which ultimately resulted in the lack of values development among new graduate nurses.[3]

Within the AACN Baccalaureate Essentials, there is an emphasis on the need for social justice as a requisite for the professional nurse. Although the literature addresses the essential nature of social justice as a professional nursing value, there is widespread consensus that nursing education is lacking in its uniformity and ability to educate graduate nurses so they can effectively operationalize social justice.[2–5] Toporek and Vaughn[6] posited that social justice learning cannot occur without a steadfast commitment by the faculty and can only happen “within a shared power paradigm” (p.181). This paradigm creates a learning environment in which the faculty does not stand at a podium and lecture, but rather engage the students in a self-reflective, experiential model of learning. Within these pedagogical strategies, students must become innately aware of the interconnectedness between the health issues of the local population and global health; they must also begin to understand that they have the opportunity to create and implement solutions to these problems as professional nurses.[7]

The use of affective teaching strategies has been shown to improve nursing students’ understanding and application of professional values.[8] Affective learning focuses on values, attitudes, and behaviors through a combination of critical-thinking, self-reflection, and evocation of emotion.[9,10] While cognitive learning focuses on facts, concepts, and principles,[8] affective learning supports the integration of knowledge with emotion, beliefs, ethics, personal awareness, and attitude.[10] Inherent in the use of affective learning strategies, nurse educators must be aware that successful affective learning is often accompanied by feelings of discomfort or anxiety, and it is essential to create a learning environment in which students feel safe in emotionally-charged learning activities.[10,11]

Outcomes of successful affective learning include self-awareness, personal growth, emotional intelligence, acquisition of a self-reflective learning process, flexibility, increased coping and resolution skills, and professional balance.[12] In a study of pedagogical methods aimed at nursing students and end-of-life care, affective activities fostered the students’ compassion in care, and allowed students to experience a new, realistic understanding of the end-of-life process.[10] Affective learning of complex concepts is a long-term process that must be nurtured with care and attention. If successful, affective learning has the potential to instill the professional value of social justice in nursing and ultimately improve quality of care.

Nursing education should consider the value of affective learning strategies when creating nursing education curriculum.[11,13,14] Doyle et al. posit affective learning impacts student attitudes toward patient care, and attitudes influ-
ence professional practice.[13] The increasing patient acuity found in healthcare today demands advanced values-based learning activities, with emphasis on affective learning alongside cognitive and psychomotor domains.[14] Hanson states “Valuing spirituality, tolerating ambiguity, affirming cultural diversity, and assuming responsibility for therapeutic interventions are humanistic characteristics that can be awakened in nurses through affective learning strategies”.[14] Affective learning has the potential to promote nursing professional values, such as the concept of social justice, in nursing students and ultimately improve health outcomes.

2 Methods

2.1 Sample

For this article, data were derived from a larger research project of nursing students’ attitudes toward poor people. The original research project was designed to assess the ability of a poverty simulation to affect the attitudes of nursing students toward people living in poverty. This research was conducted in a public university in the Rocky Mountain Region with approximately 10,000 undergraduate students. As shown in Table 1, a convenience sample of 196 undergraduate nursing students participated in the research study. Carried out over a two year period, with four cohorts of undergraduate nursing students, nursing students participated in a poverty simulation in which they were asked to live in poverty for a simulated one month time period. Approval from the University Institutional Review Board was received prior to the beginning of data collection.

Table 1: Demographics of sample

| Sample Size | N = 196 |
|-------------|---------|
| Age         | x = 27.16 years (SD = 7.89) |
| Gender      |         |
| Male        | 21 (10.7%) |
| Female      | 175 (89.3%) |
| Ethnicity   |         |
| White       | 180 (92.3%) |
| Latino      | 6 (3.1%) |
| Black       | 1 (0.5%) |
| Asian       | 3 (1.5%) |
| Mixed (White/Latino) | 3 (1.5%) |
| No Response | 2 (1.0%) |

As shown in Table 1, the sample consisted of 196 participants of varying age, gender and ethnicity.

2.2 Procedure

The Missouri Association for Community Action Poverty Simulation was used as a learning strategy in which student participants experience a simulated month where they began to understand what it is like to have inadequate financial resources and experience the everyday struggles and stressors of living in poverty. Students become a member of one of 26 families for the course of the simulation experience, during which they are expected to accomplish activities of daily living such as maintaining employment, seeking resources, caring for children, or shopping for food during the “month” of the simulated experience. Families were clustered in the center of the simulation, with various community resources located on the perimeter of the room, and each family navigated daily life with limited resources. A facilitated debriefing followed the simulation. This article reports the findings that emerged from researcher observations, field notes, and student responses and statements during the debriefing sessions that were conducted at the end of each poverty simulation.

2.3 Data collection

Observations of student behaviors and interactions throughout the simulation were recorded in researchers’ field notes while students were engaged in the simulation. A debriefing session approximately 60 minutes in duration occurred after each simulation to provide students the opportunity to discuss and reflect on their experiences and to explore their reactions and feelings during the simulation. Each cohort of students was separated into 5 groups of 8–10 people in order to begin discussion of their thoughts and experiences related to the simulation. Subsequently, the groups were combined to allow for sharing of all groups’ overall impressions. After reflection, students identified opportunities for integration of their experience in simulated poverty to their future professional nursing practice. The debriefing sessions were guided by semi-structured questions (see Table 2) and participant responses were hand written by the team of researchers at the time of the debriefing.

Table 2: Examples of debriefing questions

- Describe the experiences of your family during this month of poverty.
- Discuss the feelings you had while going through the simulation.
- How did other people respond to your needs? How did you feel about their responses?
- What insights or conclusions have you come to about the life experiences of underserved populations?

2.4 Data analysis

Using the data from focus groups and participant observations, analysis began after each cohort of students participated in the simulation/debriefing experience. Individually, researchers analyzed the data, highlighting significant state-
3 Results

During the first two weeks of the simulation, students were composed, organized and polite as they engaged in daily living. Their children went to school; some went to work while others sought out assistance at community agencies, such as social services, or sold a part of their possessions at the local pawn shop. Week three of the simulation created an insurmountable challenge for families with school aged children because there was a “school holiday”. With few or no resources for child care, young children were left at home alone; unsupervised, idle youth engaged in illegal activities and found themselves in jail. Parents lost their jobs due to absenteeism or lateness. Rent and utilities were overdue; families were evicted from their homes, others had no lights or heat. Food was scarce and children were hungry. During week four, participants’ behavior and mood changed to one of urgency, desperation and chaos. They hurried from one resource to another, standing in long lines only to learn there was no assistance or to be referred to yet another agency. Anger and frustration permeated participants’ communications and interactions. Some participants persisted and worked through many of their challenges, others retreated, overwhelmed by their abysmal situation. The end of the simulation was met with great relief by the participants. Their daily struggles and worries had ended. Themes that emerged from participants’ experiences in the poverty simulation demonstrated that this affective learning strategy transformed views and thoughts regarding issues inherent in social justice. Researchers identified four themes: The American Dream Isn’t for Everybody, Trapped in my Own Life, It’s Just Not Enough, and Completely out of Control. Through their dialogue, students began to reflect on social justice as a moral imperative for the nursing profession and share a personal compass for understanding their role as individuals and professional nurses in promoting equity and justice. Qualitative statements by the participants post-simulation emphasized the simulated experience of poverty created profound thoughts and emotions as they navigated the world from a different financial perspective. Participants noted personal attributes are not always the cause of poverty. An awareness of common struggles and stressors of those who are poor emerged, illuminating injustice and inequality in everyday life in our society.

3.1 The American Dream isn’t for everybody

Overall, the themes generated by these participants reflected a new appreciation for the experience of impoverished people and the struggles that they face living day to day. There were moments of epiphany in which they reported a further understanding of the realities of poverty and injustice in our society. One participant stated:

I feel very naïve after going through this experience. I have known my whole life that, in our society, people are either the “haves” or the “have nots”. But I have also believed that we lived in the land of opportunity. If you wanted something better for yourself or your family, those opportunities existed. But, they don’t. Equality doesn’t really exist, and some people will never be any better off than they are right now… and that is not fair. It is a dismal realization.

Perhaps the most pervasive sentiment shared by participants following the simulation experience was the idea that they began to lose hope as the reality of poverty began to consume them. Frustration was voiced as the participants experienced week to week losses in regard to finances, educational opportunities, and lack of support from their community. One participant made the decision to pawn his television and stereo to ensure that he could provide food for his family for one more week. As he walked away from the pawn broker, he shook his head and said to the people standing in the Pawn Shop line, “So much for the American dream”.

3.2 Trapped in my own life

A misconception that participants may have brought with them to the poverty simulation was the idea that there are
personal attributes which predispose people to a life of poverty. It may be easier to consider a person living in poverty is lazy or lacking intelligence than it is to understand the various societal institutions make it increasingly difficult for a poor person to overcome financial impediments and increase overall quality of life. One participant provided his thoughts on the societal attributes that contributed to his “impoverished family”:

I realized that people aren’t poor because they are lazy, or unwilling to work. In the case of our family, I worked and my spouse stayed home and took care of our young children. But at the end of the week we didn’t have enough money to pay the bills. So, regardless of our efforts, it didn’t matter in the end.

Participants also began to understand planning and thoughtful consideration about their circumstances did very little to change the end result. They could discuss the various options that they had for “getting ahead” or “overcoming poverty”, but often their plans were thwarted by situations over which they had very little power.

My family had a plan in place to get ourselves out of our financial hole, but our child was sent home sick from school, and we didn’t have day care. We had to choose to allow her to stay home by herself, or for me not to go to work. So, I didn’t go to work. After a day or so, I got fired. Then, there wasn’t much we could do...we were stuck. We had no money to pay our mortgage, our utilities, and eventually we started pawning stuff so we could eat. I can’t imagine how trapped people feel in their own lives.

3.3 It’s just not enough

The participants emphasized that the various resources available to them throughout the simulation experience were inadequate to help them overcome their poverty state. One participant stated that she needed, “more money, more time, and more people that cared” if she ever hoped to “leave poverty in the rearview mirror”. At the beginning of the poverty simulation, students were introduced to the various institutions around the room that exist to provide assistance for them throughout the experience. A participant shared her perspective on the resources available for the poor:

As I looked around the room, we were told that there were many agency resources to assist us throughout the simulation. But, I also knew that the Pawn Shop and Quick Cash locations were not really there to help us. They are predators and we (poor people) are perfect targets.

Another participant discussed her frustrations at the attitude of the people she encountered throughout her experience:

The person at the bank was arrogant and condescending. I didn’t feel as if he cared about me at all. He stood there looking at me with that smug look on his face and I wanted to yell at him, but I knew it wouldn’t do me any good. It was almost worse talking with the social services representative. Her job is really to help people and create more opportunities for us, but she seemed clueless as how to do that.

Participants also discussed time as a commodity in their daily lives within this experience. Each week did not provide them ample opportunity to accomplish the various tasks they felt were necessary in order to stabilize their financial situation. One student explained:

I spent almost the entire day waiting to meet with the social service representative. I felt like she was my last hope to get more food stamps, or something that would help my family. When I finally got a chance to talk with her, she said she could give me $38. It was ridiculous. How long do you think $38 is going to feed a family of five people? I thought it was a huge waste of my time.

Another participant discussed that it felt like a “pressure cooker” within the room as the poverty simulation progressed. He felt time was his greatest need, but there was “no way to increase the minutes in a 24 hour day”. He said:

The first week, we were fairly relaxed because we didn’t really know what we were doing. By the third week, I literally ran to the Community Action Agency. I probably looked stupid, but I didn’t care because I knew I wanted to be first in line. It was the only way that I was going to have time to get everything done I needed to in order to feel some level of success.

An additional resource that participants perceived as a necessity was the idea of education as a way to create more opportunities. They understood being educated helped them in devising plans that ensure success in overcoming poverty. They also began to see education as difficult to achieve for people living in poverty because it is often “given up” in the process of “surviving”. One family had a college student at the beginning of the simulation and said,

Our oldest ‘daughter’ started out going to college for the first few weeks, but we soon realized that this was a luxury that we could not afford. We completely understand the importance
One student stated, realized they could not readily change their circumstances. Finally, participants voiced a sense of desperation when they described these emotions becoming even more heightened as the simulation experience progressed, and they began to doubt whether or not they would be successful in their ability to financially support their family. One participant laughed as she said,

"We were completely out of control for the first two weeks. We were disorganized in our efforts. I didn’t make it to work, so I got fired. My child only made it to school one day. We weren’t exactly sure what to do. We went from resource to resource, trying to figure out where we could get assistance. It felt like an exercise in frustration."

Another participant echoed her remarks:

"I stood in line at Social Services for half the day, and when I finally got to talk with the representative, she informed that there was very little that she could do for me. It was frustrating. I could actually feel myself getting angry, and then had to remind myself that it wasn’t real."

Finally, participants voiced a sense of desperation when they realized they could not readily change their circumstances. One student stated,

"There was a sense of doom and gloom as we neared the end of the month. We just sat in our ‘house’ and tried to figure out some way to dig ourselves out of this financial hole. We discussed several options, but you could tell that we didn’t even believe things were going to get better. So, we entered the last week with a sense of apathy because we were not going to change our circumstances and we had given up."

The themes that emerged from debriefing provide rich information about participants’ perceptions of this poverty experience and the potential of this teaching strategy to impact knowledge regarding poverty, but also a more profound understanding of the underlying concepts of social justice. While going through this experience, participants expressed an affective component of simulation that allowed them to empathize more closely with people that suffer from disparities and injustice.

3.4 Completely out of control

The final theme that emerged was the array of emotions elicited through this simulation experience. Most of the participants voiced at least some degree of uncertainty, skepticism, or confusion throughout the simulation. Some described these emotions becoming even more heightened as the simulation experience progressed, and they began to doubt whether or not they would be successful in their ability to financially support their family. One participant laughed as she said,

"Another participant echoed her remarks:

"We were completely out of control for the first two weeks. We were disorganized in our efforts. I didn’t make it to work, so I got fired. My child only made it to school one day. We weren’t exactly sure what to do. We went from resource to resource, trying to figure out where we could get assistance. It felt like an exercise in frustration."

4 Discussion

One of the difficulties in teaching social justice concepts within nursing education is the dearth of literature available regarding effective pedagogy that support the development of social justice thinking in nursing graduates. Although the AACN Baccalaureate Essentials[31] have identified social justice as one of five professional values, the development of curricula that integrates this value has been slow to develop. The question remains as to the best teaching strategies to foster the growth of social justice as a key concern for nurses throughout their professional practice. Based on the information gleaned from the current study, the researchers sought to develop new pedagogy that has a greater potential to assist in the development of social justice as a professional nursing framework as well as educate nursing graduates with the necessary advocacy skills to make a difference for vulnerable populations.

The first step in renewing the commitment to a social justice paradigm is a frank assessment of how and where information is in nursing curriculum. It is inadequate to merely discuss or define the concept of social justice within one particular course in a nursing program; this approach is ineffective at instilling the ultimate importance of this key leadership construct in nursing students. Rather, social justice should be integrated as a threaded concept throughout every semester of the nursing curriculum. In this manner, students are introduced to social justice early in their nursing education, with increasing opportunities for affective learning and professional nursing development with each subsequent semester of the program. This important endeavor cannot proceed in a haphazard manner; careful consideration and planning must take place prior to curricular modification.

The implementation of varied pedagogy is essential in enhancing social justice content within nursing programs. The literature demonstrates that traditional lecture is inadequate in cultivating social justice in nursing graduates. Affective learning strategies have potential for creating new nurses who grasp the essential nature of social justice for our society, as well as prepare them to advocate for the necessary changes within healthcare systems and the political arena. Affective learning strategies have a greater propensity toward fostering personal growth and self-reflection for individual students. Affective learning strategies are effective
and successful in learning environments in which students perceive safety in voicing their beliefs, without fear of judgment. A potential strategy with beginning nursing students is the use of a “Media Blitz” exercise where students are exposed to pop culture movie clips that portray injustices in society. The students are asked to view select scenes from various movies with social injustice represented and then discuss the emotions that are conjured up while watching these scenes. They are then asked to reflect how these injustices align with the realities of our culture.

With each subsequent semester, students can be further immersed in the concept of social justice. This professional nursing value should be incorporated in every course across the curriculum. Social justice elements can be integrated in a medical-surgical high fidelity patient simulation and debriefing. Within public health courses, the poverty simulation is a valuable tool in creating greater empathy in nursing students and raising collective awareness of social justice as a professional imperative. Clinical faculty also plays a key role in highlighting injustices inherent in healthcare during post-clinical conferences. Students can be encouraged to reflect on the inequities they see in their everyday interactions with patients and examine their own beliefs and biases. Clinical educators must mentor advocacy for patients and raise awareness of systemic barriers that influence the health status of patients. Regardless of the patient care environment in which they are practicing, students must be encouraged to think beyond the individual patient, to focus on the potential for their leadership to improve the systems that contribute to health disparities for so many. There are innumerable opportunities for social justice integration in nursing curriculum.

The findings of this investigation provide strong evidence about the effectiveness of one affective learning strategy; the Missouri Association for Community Action Poverty Simulation fostered the potential to change nursing students’ perceptions and attitudes regarding the persistent and pervasive inequities in society, and shape their roles and practice as future nurses. This affective learning experience stimulated reflection by the students in which they expressed powerful emotions and feelings. These insightful student voices enlightened and prompted nursing faculty to explore and incorporate course specific affective learning strategies regarding social justice issues across the curriculum. Future research must evaluate the effectiveness of affective strategies in fostering, not only social justice awareness, but also the perceptions of nursing graduates that they can make a difference; with the ultimate goal that they will enter practice prepared to advocate for patients.

5 Conclusion

Implications for nursing practice

Findings from this research provide nurse educators with an understanding of the need to critically examine undergraduate nursing curriculum related to social justice. It is necessary to assess baccalaureate nursing education and determine the adequacy of emphasis on the integration of information to create a social justice framework for nurses. This appraisal of curriculum should also examine the pedagogical strategies employed to teach this content with an understanding traditional lecture is insufficient when teaching these essential professional nursing concepts. Teaching strategies must facilitate integration of social justice in the thoughts and actions of new nursing graduates.

Affective learning strategies provide the optimal pedagogy to evoke emotions that foster empathy for social injustice and human inequities. These strategies create an environment in which students not only learn about the constructs of social justice, but they also are able to incorporate these into their own values and beliefs and apply those principles in their daily interactions as a professional nurse. Future research should measure the ability of affective learning strategies to foster a social justice platform by which new graduates base their professional actions. The ultimate objective should not only be on the development of knowledge related to social justice, but also focus on the application of social justice in the practice setting.

As healthcare reform moves forward, it is imperative that we educate the next generation of nurses to be proponents for the marginalized of our society. Nursing students enter the professional world with an opportunity to provide advocacy one patient encounter at a time. Further these future nurses must be prepared to guide policies to promote a just society with equity in opportunities for health and quality of life for all. Nurses are poised to push the social justice agenda forward, but only if they are provided with the necessary education and experience to overcome the realities of healthcare and inequities of society. With a renewed commitment to social justice, nurse educators have the potential to instill nursing students with the necessary skills and commitment to fundamental human rights and enrich the future practice of tomorrow’s professional nurses.

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