

Learning Writing Assignments Across the Undergraduate Nursing Curriculum

by

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A thesis submitted in partial fulfillment of the requirements for the degree of

Doctor of Philosophy

in

Writing Studies

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Abstract

Many studies in the fields of postsecondary education and WAC/WID writing research have documented respectively the kinds of genres undergraduates write in college but few develop an in-depth and contextualized understanding of how students learn their major area of study through writing discipline-specific genres. This doctoral research specifically reports findings from an interdisciplinary case study that explored learning to write in one baccalaureate nursing degree program at one Canadian university. A combination of rhetorical genre and situated learning theories and institutional ethnography methods were used to help document student and instructor perspectives of learning to write two recurring writing assignments called the scholarly paper and journal of reflective practice, which students composed in each semester of their program. There were 32 classroom observations, 22 assignment documents, and 39 voluntary, semi-structured interviews with 34 students and 5 instructors from 4 courses. As a way to capture participants' respective teaching, learning, and writing perspectives, interviews focused primarily on interactional patterns that enabled or constrained undergraduates' writing development and professional enculturation across all four years. The study found that scholarly and reflective writing assignments were complex sites of interaction and dynamically entangled with changing personal, political, relational, emotional, and philosophical perspectives that differed from year to year as students advanced through their major field of study. From year to year, perspectives fluctuated with student/teacher assumptions, competitive/cooperative emotions, and values/attitudes towards writing assignment design, assignment supports, and classroom teaching and learning philosophies. Key factors that enabled students' writing development were situated in the relational and affective domains of learning to write assignments, such as peer mentoring programs, where lower-year students learn to write from upper-year students, and rapport with

nurse educators and professional nurses, where students learn to write content from a nurse with experience in the content area. Challenges to students' writing development were situated in the personal, political, and philosophical domains of learning to write assignments such as having reading deficiencies, a myriad of expectations, inaccurate articulation of writing needs, assumptions about writing in professional nursing, developmentally inappropriate assignment design and assignment supports, and unpredictable competition between peers in classroom discussion. The significance of the study was to supplement existing knowledge of postsecondary WAC/WID pedagogies and to advance disciplinary strategies for faculty development and writing assignment design.

Key Words

Postsecondary education, WAC/WID, writing assignments, student writing development, nursing education, interdisciplinary, rhetorical genre, ethnography, case study, interactional patterns, undergraduate teaching and learning

Preface

This thesis is an original work by Susan Chaudoir. This thesis is interdisciplinary in nature between two disciplinary fields of education and nursing and contributes in its entirety to any and all research and publications in those respective disciplines. At the time of submission, no part of this thesis has been previously published. The research project, of which this thesis is a part, received research ethics approval from the University of Alberta Research Ethics Board, for the project named *Learning Writing Assignments in the Faculty of Nursing Undergraduate Curriculum at the University of Alberta*, Number Pro00027966, on February 10, 2012.

Acknowledgements

I wish to acknowledge several research granting agencies who recognized, awarded, and funded my doctoral research: Social Science and Humanities Council of Canada, Myer Horowitz Graduate Scholarship, Graduate Student Association's Outstanding Research in Social Sciences, J. Gordin Kaplan Research Award, and Profiling Alberta's Graduate Research Award. I was very proud to have my research extended into a primary undergraduate research project, which was funded by a grant from the Undergraduate Research Initiative at the University of Alberta.

With gratitude and joy, I delightfully thank so many different kinds of people who helped see my doctorate to completion. First, I am deeply grateful to the nursing students and instructors who freely, admirably, and transparently shared their teaching and learning experiences and allowed me to write about them. They are all truly an inspiration to my own teaching and remind why I love this job so much.

My advisor, Marg Iveson, was and always will be the best graduate supervisor ever. You just do it right and I thank you for enriching my mind, soul, and spirit. My nursing advisor, Gerri Lasiuk, never doubted my abilities to undertake this multifaceted study. Nursing is known as the caring profession and, Gerri, you exude care in every way. You just walk the walk with dignity, kindness, generosity, respect, and an endless supply of encouragement. I've kept every email and I am a better person because of you. My examining committee members were interested in my research and pointed me in all the right directions. I am grateful for the network of colleagues that I have developed over my doctoral tenure.

After 5 house moves in 3 years and struggling to find decent housing on a graduate student budget, Devon Taylor and Garret Henley moved out of the most posh apartment that I've ever lived in so that I could write my thesis. Without them, I would have never finished this

document and I probably would have given up and gone home. Thank you just isn't enough.

They gave me the gift of a home that I could call my own. I got my health back thanks to them.

My pastoral and therapeutic counselors in Edmonton, Mary Fami, Paramjit Kaur, Tammy Flipsen, Jonathan Crane, and the Emmaus Gathering, each deeply studied in their disciplines, dispensed a whole arsenal of practical wisdom and exemplified courage, caring, compassionate, contemplative, Christ-centered living. They kept my dignity when I felt I had none and showed me how to speak courageously against the shaming that I witnessed and for shame's anecdote: empathy, trust, and connecting to love and belonging.

My dearest friends in Scotland always gave to me true love and belonging: Linnea and David Randall, Allan Goldie, Sean Doyle and his lovely family, Rosalba Meloni, and Elizabeth and Jim Scotland. We always pick up right where we left off. You hold my heart and happiness.

My family, thousands of miles away, unconditionally love this crazy kid who wanders and explores the world to discover, create, and invent on her own. I've had a full life of adventures because of them. My discipline, diligence, drive, and determination are rooted partly in our family's history. My brother Tony sent heartwarming cards and text messages just when I needed them most. He's the greatest gift my parents ever gave to me.

My mom, Mary Pelton, deserves the greatest acknowledgement. She sent countless care packages, cards, emails, and phone calls, which helped me to see the light where there was no light. I think she is my deepest and richest love of my life. My Dad and stepmother, Larry and Debby Chaudoir, encouraged me constantly, made me laugh, and distracted me with the latest Lions Club event, football scores, and other bemusing sports and family news. They never doubted. Not one day. Thank you.

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Format of the Thesis

The Faculty of Graduate Studies and Research at the University of Alberta accepts three kinds of doctoral thesis formats: traditional format, paper format, and mixed format. The traditional format consists of a full introduction, literature, methodology, analysis, findings, conclusion, bibliography, and appendices (if any). The paper format consists of published or yet-to-be published papers, usually free standing, of normal journal article length, are preceded by a brief description of the background of the general research topic, and proceeded with conclusions and/or implications for future research, a bibliography, and appendices (if any). The mixed format blends selected aspects of the traditional and paper formats.

The doctoral thesis presented here is the mixed format, which is fully supported and approved by my co-supervisors, Dr. Margaret Iveson, Faculty of Education and Dr. Geraldine Lasiuk, Faculty of Nursing, and is compatible with standards established by Library and Archives Canada, the Faculty of Graduate Studies and Research, and my home supervisory department of Secondary Education in the Faculty of Education. There are two reasons for this mixed format. First, this doctoral thesis is a report of research findings. The essential background information, theory, and literature review were extensively written in the proposal document for the doctoral candidacy and passed committee examination with no revisions or suggestions, and therefore, do not need to be reiterated here in the final report of findings. Second, the investigation required the researcher to report four separate findings chapters (not just one). The co-supervisors and doctoral candidate wanted each of the findings chapters to be written in a publication-ready format. Therefore, each chapter of findings consists of its own description of participants, data analysis, findings, a dedicated set of literature pertinent to the analysis and findings, concluding remarks, and a summary of findings. According to the paper format, cited

references would be placed within each of the findings chapters, however, in accordance with the home department's doctoral thesis requirements, all citations throughout this thesis are placed in the references, which follows the last chapter of the thesis.

This mixed format thesis has 11 chapters that are organized in the following way. Chapter 1 briefly introduces the importance of the topic and how the doctoral candidate came to undertake the study, and includes the purpose, focus, objectives, and primary research questions of the study. Chapter 2 provides a concise but detailed overview of the theoretical framework, method, and data collection used for the entire study. This chapter is brief because each of the findings chapters includes its own respective data collection, analysis, and participant descriptions.

Chapters 3 through 6 report the findings specific to Year 1, Year 2, Year 3, and Year 4 respectively. Each of these chapters is organized accordingly: Assignment description (with figures showing the assignment); participants; data analysis; findings from interviews; student suggestions (if any); student descriptions of teaching, learning, and writing in previous years (if any); researcher's closing remarks; and summary of findings. Chapter 7 provides a synopsis of the findings from Years 1 through 4. The thesis concludes with a discussion of the limitations of the study (Chapter 8), recommendations to the study's Faculty of Nursing (Chapter 9), future research implications and suggestions (Chapter 10), and a final commentary about what the researcher learned from this doctoral research (Chapter 11).

Overall, this thesis is based on the researcher's interpretation of the project titled *Learning Writing Assignments Across the Undergraduate Nursing Curriculum* and attempts to articulate the pedagogical and developmental practice of writing compulsory genres that are repeated, sequenced, and assessed across one baccalaureate nursing degree program. More

generally, this thesis attempts to provide insight into the affects that writing assignments have on (not) achieving intended learning outcomes of postsecondary degree programs, to provoke the deep-seeded beliefs about student writing, and to unsettle declarations about the ill- and under-prepared communication skills of graduates from Anglo-Canadian (and British and American) colleges. The hope is to elevate, deepen, and widen the conversation surrounding the diverse practices and perspectives of postsecondary student learning and classroom instruction. As such, I welcome the reader to engage with the reported findings as an on-going narrative of students, teachers, learners, and writers who attempt to communicate in your own classrooms.

Chapter 1

Introduction

Students entering college and encountering its discourses have a difficult task. One of the difficulties they will encounter involves learning to write. Students will encounter academic discourse that requires them to write differently—to produce new, more complicated forms of addressing challenging topics with greater depth, complexity, and rhetorical sophistication. Students must, as Bartholomae (1986) suggests, begin to *invent the university* in their writing. Students have to learn to write through curricular discourses that they do not grasp intellectually or emotionally (Slevin, 1988).

As an educator for more than 15 years, I am aware of what Bartholomae and Slevin articulated so well regarding the challenges that students face when attempting to learn the genres they are asked to write in college. After I arrived at the University of Alberta in January 2009, I tutored in the Centre for Writers for three years. This experience allowed me countless conversations with students about their writing and enabled me to see hundreds of writing assignments in dozens of different disciplines. This tutoring experience was coupled with an opportunity to contribute to original writing studies research in the university's Writing Across the Curriculum (WAC) program. For three years, I was the lead research analyst on projects that eventually expanded into multi-institutional research of writing assignments (Roger, Graves, principal investigator; see <http://wac.ctl.ualberta.ca/research.aspx>), which I believe it will have a lasting impact on the ways in which we understand academic writing demands in postsecondary education. I undertook my own primary research of writing in higher education in order to contribute empirically and theoretically to such understanding in the context of learning to write in one discipline at one postsecondary institution.

My doctoral research specifically focused on how nursing students learned writing assignments and asked the primary research question, *how do students learn writing assignments across the nursing curriculum?* In addressing this question, I wanted to understand how learning with, by, and through writing assignments connected undergraduate nursing students to the broader curricular learning outcomes. I was interested in learning more about the anatomy of connecting teaching and learning with writing assignments and revealing the ways that undergraduates went about learning to write what was asked of them across all four years of one undergraduate degree program. With my experience of analyzing several different disciplinary studies of writing assignments, I approached the Associate Dean of Undergraduate Curriculum, Dr. Joanne Profetto-McGrath about my research and she agreed that such research would be valuable for gaining insight into postsecondary classroom teaching and learning.

Overview of Case Study Faculty of Nursing and its Educational Instruction

My case study took place solely at the University of Alberta's Faculty of Nursing on the Edmonton campus. This Faculty is one of six in Canada to offer a range of undergraduate and graduate degree programs. My case study specifically drew its sample from one undergraduate degree program called the Bachelor of Science in Nursing (BScN) Collaborative Program. The program is a 4-year full-time undergraduate degree program that students enter directly from high school or with some postsecondary education. The program is called *Collaborative* because in addition to being offered at the University of Alberta campus in Edmonton, all four years can be taken at other educational institutions in Alberta including Red Deer College, Keyano College, and Grande Prairie Regional College. All sampling for my case study was conducted at the University of Alberta campus in Edmonton. This university is considered a tier 1, research-intensive postsecondary institution in Canada.

The BScN Collaborative Program uses a method of instruction known as context-based learning (CBL).¹ CBL is a variation of problem-based learning (PBL) and employs realistic, complex studies (e.g., scenarios) as the basis of its 4-year curriculum. With the guidance of an instructor (also called a tutor in this program), students work independently and in small group seminars to research, learn, and share information from nursing, physical sciences, medical sciences, social sciences, and humanities to plan care plan for the patients in each scenario. This process is intended to facilitate engaged learning and prepare its graduates for a profession that is continually changing as new evidence research and practice methods emerge. The underpinning principals are that rather than memorizing information, students learn to think critically and analyze real problems; find, evaluate, and use evidence-based resources; work collaboratively; communicate effectively; and deal with ambiguity competently or successfully. At the time of conducting this case study, seminar-based and clinical-practice courses were six weeks in length. The former occurred in small-group classroom settings on campus and the latter occurred in various acute, long-term, and community settings. Normally, students have six years from the time of admission to complete requirements for the program.

Purpose and Significance of the Study

Postsecondary writing scholar Paul Rogers' (2008) review of 11 longitudinal studies² demonstrated that student academic writing develops in multidimensional, nonlinear ways through discipline-specific enculturation. He supports cognitive psychologist Ronald Kellogg's (2006) sociocultural view of development, which suggests that academic writing is highly

¹ My case study Faculty is one of two nursing faculties (i.e., nursing schools or nursing colleges) in Canada to use this method of instruction. The other is the School of Nursing at McMaster University in Ontario. However, McMaster's School of Nursing labels this method of instruction as problem-based learning (PBL).

² McCarthy (1987), Haas (1994), Beaufort (2004), Spack (1997), Chiseri-Strater (1991), Herrington and Curtis (2000), Sternglass (1997), Carroll (2002), Sommers (2002), Haswell (2000), and Brandt (2001).

contextualized and socially situated (Chiseri-Strater, 1991; Herrington & Curtis, 2000) and that writing develops slowly in and beyond the college years (see also Beaufort, 2007). Kellogg, who currently serves on the editorial boards of *Reading and Writing: An Interdisciplinary Journal*, *Written Communication*, and *Journal of Writing Research* and is considered an expert in writing development, recently suggested that “several years are needed to acquire domain-specific rhetorical skills and practice is needed to craft knowledge for a specific audience” (2006, p. 398). Education researchers at the Ontario Institute for Studies of Education (OISE) Carl Bereiter and Marlene Scardamalia (1987, p. 11) further contend that it takes 10 or more years to advance from “knowledge-telling” to “knowledge-transforming” (see also Scardamalia & Bereiter, 2006 for knowledge building theory).

In a case study of students learning to write assignments in economics at the University of Adelaide in Australia, Centre for Teaching and Professional Development Specialist Barbara Wake (2010) learned that students’ writing abilities and growth as writers were incremental at best and overall “*devolutionary*” (p. 297, italics in original). Wake attributed the episodic appropriation of disciplinary discourse to the use of language in the writing assignments and to classroom and non-classroom dialogic interactions (p. 307). Likewise, Rogers’ (2008) longitudinal research of writing in college identifies classroom and non-classroom factors that influence the development of student writers and students’ writing abilities and constructed four dimensions of the learning environment. These factors include classroom discourse, classroom genres, teacher behaviors, and non-classroom related factors (p. 113). Although Rogers describes the influence on his participants’ academic writing development, he did not empirically examine the factors.

Developments in academic writing theory and pedagogy in higher education (e.g., Bazerman, Dean, Early, Lunsford, Null, Rogers, & Stansell, 2012; Ganobcsik-Williams, 2006) advanced my understanding of best practices for teaching with writing assignments (Graham, MacArthur & Fitzgerald, 2013); of discipline-specific models of academic identity (e.g., Casey, Kara, Eldred, Grief, Hodge, Ivanic, Jupp, Lopez, & McNeil, 2006; Chaudoir, Oermann, Grant, Glahn, & Waugh, 2014; Lea & Stierer, 2009); and of instructional epistemologies of learning to write in disciplinary contexts (e.g., Bean, 2011; Cross, 1999; Werder & Otis, 2010). There is a growing consensus among postsecondary and higher education researchers that the interactions between teaching, learning, and writing assignments are a pedagogical space for student development; are essential to teaching learners self-assessment skills and life-long learning (Rijlaarsdam, Braaksma, Couzijn, Janssen, Raedts, van Steendam, Toorenaar, & van den Bergh, 2008); contribute to (meta)cognition (Marttunen & Laurinen, 2012); and prepare students for professional practice (Shulman, 2005), particularly in the health care education disciplines, such as nursing education (Benner, Sutphen, & Day, 2009).

In nursing education, writing is a primary means for teaching content, developing critical thinking, supporting the development of professional identity, and enculturating students into the discipline and profession of nursing. Nursing researchers have demonstrated that collaborative writing and peer feedback in particular improve students' writing proficiency and communication skills, both of which are deemed critical to the practice of nursing (e.g., Luthy, Peterson, Lassetter, & Callister, 2009; Rooda & Nardi, 1999; Schneider & Andre, 2005; Sorrell, 1988; 1998; Troxler, Vann, & Oermann, 2011; Whitehead, 2002). Little research has considered how baccalaureate writing assignments, as complex sites of interactional patterns, affect

students' writing proficiency and communication skills across the 4-year trajectory of their baccalaureate nursing program.

Writing traditions of the nursing discipline share a set of intentions that emphasize sociocognitive habits integral to professional practice. Writing pedagogy in baccalaureate nursing uses particular writing genres to cultivate a professional identity and assimilate students to traditions of practice and performance, as a way of thinking. In the baccalaureate academic curriculum, there are two dominant genres to assimilate and acculturate students: reflective writing and scholarly writing. Unfortunately, little is known about how reflective and scholarly writing assignments are used in context and no studies, to my knowledge, examined them across all four years of the baccalaureate curriculum.

This doctoral thesis reports findings from a study that explored how nursing students learn to write assignments across all four years of one Canadian baccalaureate nursing program (Chaudoir, 2013; Chaudoir & Liao, 2013). The purpose of the research was to explore disciplinary best practices, writing instruction, and student enculturation into professional nursing practice through instructor and student perspectives. The intent was to document how students learned to write assignments and to identify the kinds of instructional interaction that enabled/constrained students' writing as they advanced through the nursing curriculum.

The study focused primarily on exploring the discursive interactions in student-instructor and peer-to-peer learning and writing of two recurring writing assignments, which students composed in each semester of their program. The goals of the study were to identify: (1) how student-instructor and peer-to-peer interactional patterns enabled/constrained discipline-specific writing development across the curriculum; and (2) how learning to write assignments shaped or were shaped by students' enculturation into the discipline and profession of nursing.

The research questions that guided my doctoral case study research are as follows:

Research Questions

The research questions that guided the research process were:

1. How do students learn to write assignments in each year of a 4-year BScN program?
 - a. What kinds of student-instructor or peer-to-peer interaction enable/constrain students' writing as they advance through the curriculum?
 - b. In what ways do students connect their learning to professional development by writing [name of assignment]?

Chapter 2

Research Design

Method

This section describes the case study research design that I used to investigate qualitatively the primary research question: *How do nursing students learn writing assignments across the nursing curriculum?* I had previous exposure to using qualitative case study methods of inquiry in education settings at Darwin College, University of Cambridge and for my Master of Science degree, I conducted a mixed methods study whilst at the Moray House School of Education at the University of Edinburgh (Chaudoir, 2007). At the University of Alberta, I was a senior researcher on three case studies that employed a content and textual analysis to examine undergraduate writing assignments in nursing education (Graves & Chaudoir, 2009); reflective writing assignments of medical students in surgery education (Chaudoir & White, 2013; 2014); and undergraduate, graduate, and postgraduate writing assignments in the Centre for Writers (Moussu, 2014). During my three years with the University of Alberta's Writing Across the Curriculum (WAC) program, I helped collect data, conduct analysis of writing assignment syllabi, and co-write academic reports for writing research in five faculties: Faculty of Nursing, Faculty of Physical Education and Recreation, Faculty of Pharmacy and Pharmaceutical Sciences, Department of Political Science, and Community-Service Learning Program (Chaudoir & Graves, 2011; Graves & Chaudoir, 2012; 2011; 2010; Graves, Chaudoir, & Verboom, 2011).

My doctoral case study combined theoretical frameworks of rhetorical genre (Artemeva & Freedman, 2008; Bazerman, 2004; Miller, 1984; 1994) and situated learning (Lave & Wenger, 1991) to explore multiple contexts of textually-oriented and sociocultural systems of writing

activity, pedagogical interactions, and discursive or communicative practices of collaborative writing and revision processes. Institutional ethnography methods (DeVault & McCoy, 2002; Smith, 2005) allowed data collection to focus on the sociocultural practice and function of the discursive and communicative interactions between students, instructors, and peers, as well as the intention and reception of how students attempted to write the scholarly paper and reflective journal assignments. The researcher used three complementary analytic tools of institutional ethnography methods:

1. *Voluntary, semi-structured interviews* with nursing instructors and students;
2. *Observations* of in-class writing instruction, classroom discussion, peer collaboration, group writing, co-writing, and assignment-specific writing supports, such as course-based writing tutorial sessions led by a writing specialist and/or co-lead with the classroom instructor;
3. *Documents* of all course materials and assignment descriptions.

It is important to note that the researcher assumes two things regarding this method. First, classroom learning and course/assignment documents shape the discursive and interactional patterns between students and instructors, and second, learning moves continually in, by, and with dialogue through which students and instructors interact. The researcher also posits that these three analytical tools of interviews, classroom observations, and course/assignment materials will only partially disclose the discourses, communicative interactions, epistemologies, or ideologies that shape how students learn to write assignments in their courses (cf., (Kincheloe, 2004, p. 60).

One aspect to highlight is that of the researcher's familiarity and rapport with the case study faculty. Although I am not a member of this case study's nursing faculty, I am familiar

with the writing-intensive curriculum and genres of assignments from previous tutoring experience and research with the WAC program. This familiarity and experience enhanced my rapport and ability to interact with participants before, during, and after the interviews, perhaps allowing participants to approach interviewing more comfortably, candidly, and honestly. Participants may also have been more comfortable knowing that I had no influence on their work or academic achievements.

After ethics and administrative approval were obtained, reputational case selection (Miles & Huberman, 1994; see also Miles, Huberman, & Saldana, 2014) was made via nursing faculty liaison who issued a call for student and instructor volunteers and administered access to course documents (See Appendix A through C for university ethics and faculty approval notices and the invitation to volunteers). The next three sections briefly describe the methods used for interviews, observations, and documents.

Semi-Structured Interviews

Interviews were the primary unit of analysis and the most valuable source of data. I consulted interviewing methods used by writing and education researchers in order develop an understanding of this method with regard to particular problems of writing and development (e.g., Beaufort, 2004; Haas, 1994; Herrington & Curtis; 2000, Spack, 1997). All interviews with study participants were voluntary, semi-structured, and most were done individually, although a few were done in dyads and triads to accommodate participant's preferences. Interviews were scheduled through the Faculty liaison and conducted on the university campus, all in one building, and in a general meeting room in the Faculty of Nursing. Interviews were scheduled by year level, meaning all first-year participants were interviewed during the same window of time, second-year participants during their scheduled window of time, and so on.

Procedures for conducting interviews were consistent with case study and institutional ethnography methods (DeVault & McCoy, 2002; Silverman, 2002; Stake, 1995; 2010; Yin, 2009), followed the highest standards of professional practice and ethical conduct³ with the utmost respect for volunteer participants, and in accordance with the Faculty liaison's recommended protocols for scheduling interviews. Before the interviews began, participants were given as much time as they requested to read a two-page information letter (Appendix D) that described the research project. Participants were encouraged to ask question(s) about the research before giving their explicit, written consent to participate in the study (Appendix E shows the consent form that participants signed).

Each interview was approximately 45 to 60 minutes and guided by semi-structured questions (Appendix F). The questions were designed to be flexible enough for the interviewer and interviewee to follow relevant trajectories during the conversations. The interview questions were fully disclosed in advance of the interviews. To help make students comfortable and encourage a more natural conversation about learning writing assignments, each interview started with a general, open-ended question, such as *tell me what you experienced as you attempted to write your assignment or what did you learn about writing the [assignment name]?* Appendix G shows a short list of questions the researcher used to help focus the conversation with student interviews. With full consent of the participants, the conversational interviews were audio-recorded and transcribed.

³ Compliance with the General Faculties Council (GFC) Policy Manual, Section 66: Human Research and University of Alberta Standards for the Protection of Human Research Participants.
<https://policiesonline.ualberta.ca/PoliciesProcedures/Pages/Research.aspx>

Classroom Observations

Classroom observations were based on Erickson's (1992) ethnographic microanalysis of interaction (microethnography; see also Streeck & Mehus, 2004, p. 382) in order to focus on specific or episodic learning interactions rather than the entire disciplinary or cultural practice of learning in nursing. Bazerman's (2004) guidelines for observing practices, writing activity systems, and genre pedagogy were also used to consider genre knowledge, rhetorical knowledge, recurring typifications, and processes of interaction to identify gradual socialization processes in educational settings⁴ (Erickson, 1992, pp. 202, 216; Erickson, 1986, p. 119; see also Cochran-Smith, 1984; Bryce-Heath, 1983; Harper & Quaye, 2010; Moll, Diaz, Estrada, & Lopes, 1992; Quaye & Harper, 2015; Weidman, 1989 for studies on gradual socialization into academic settings).

Observations took place in two particular settings: the classroom and out-of-class peer-group writing sessions. There were two types of out-of-class writing sessions: meetings where students would co-write group writing assignments and peer-group, assignment-specific writing tutorials with a writing specialist. Observations were recorded using written field notes and were not audio or video recorded. Observation field notes followed a technique suggested by Geisler (2004), which I used in a previous case study (Chaudoir, 2007).

Documents

Documents for this case study included print, web-based, and electronically-produced communicative materials that directly referenced or described the writing assignment(s) in this one baccalaureate nursing program. The documents were course outlines (syllabi), assignment details, general marking guides, assignment-specific marking guides, assignment-specific

⁴ Erickson's studies drew attention to two types of knowledge that he coined as knowledge of academic task structure (ATS) and knowledge of social participation structure (SPS).

templates, learning outcomes, and student learning plans. These documents are discussed in the findings chapters. The documents were purposively collected to examine three categorical text features: use of verbs and imperatives; explicit task(s) students were expected to perform; and ways in which the text appeared to position the student with respect to completing the assignment (e.g., expectations, criteria, sources, prompts). Of interest were explicit communicative and rhetorical features of text that helped or hindered the students' ability dialogically interact with instructors, peers, and/or the writing tutor, learn to write the genre, and complete the assignment.

To account for the discursive and sequential interactions of these documents, I followed Neundorf's (2002) systematic coding procedures, which accounted for domains of writing activity beyond the produced text and Holsti's (1969) approach of organizing content of communication. I was aware that textual domains of content could not account fully for intended or received motives, attitudes, and values of communication documents, and, therefore, textual domains were validated with the two other qualitative measures of classroom observations and interviews (Holsti, 1969, p. 16). The documents were used to prepare for interviews with participants and to compare (cross-check) with interview transcriptions during the data analysis stage.

It is important to note that samples of students' writing were *not* collected in this case study. The pedagogical focus was on learning how to write the assignment *before* it was submitted for a final grade. Nancy Sommers (2010) pointed out that researchers might learn more about student writing by asking students to talk about their writing. She found that students could talk in more sophisticated, metacognitive ways about their writing than the writing itself could support.

Data Collection

Data collection began in March, 2012 and ended in March, 2013 and took place solely at the University of Alberta's Faculty of Nursing on the Edmonton campus. The final sample included 39 participants (33 students and 6 instructors), four writing assignments (one from each year level and each from different courses across the curriculum), 22 textual documents, and 38 observations (Table 1). The analysis included more than 700 pages of data, which included observation notes, course documents, participant's notes and emails to the researcher, and interview transcripts. Interview transcripts were the primary source of information for identifying and characterizing participant's views on learning to write assignments across the nursing baccalaureate curriculum.

Table 1

Data sample by Year Level

	Assignment	No. of Students	No. of Instructors	No. of Students Endorsement Interviews	No. of documents	In-class observations	Out-of-class observations
Year 1	Reflective Journal	4	3	8 (one focus group)	10	15	1
Year 2	Scholarly Paper	4	1	0	4	9	2
Year 3	Scholarly Paper	5	0	3	3	0	2
Year 4	Scholarly Assignment	6	1	4 (one focus group)	5	8	1
Totals		19	5	15	22	32	6

Analysis was iterative, using a constant comparative method to re-examine the data against the emerging categories and their related variables (Geisler, 2004; Yin, 2009). During this phase, I consulted Haswell's (2000) study to develop categories that reflected what mattered most to participants about teaching and learning writing assignments. Preliminary analysis of interview transcripts always took into consideration: What are the participants describing? What

do they care about? What concerns do they have? If they mentioned something as being influential in learning writing assignments, what exactly did they say about it? What additional words, phrases, or literature helped explain their perspective or experience? What problems, if any, were emerging from their responses?

Next, Chapters 3 through 6 present the findings from Years 1 through 4 respectively. Each chapter provides a full description of the assignment, figure(s) of the assignment, participants, analysis, findings from interviews, student suggestions (if any), student descriptions of teaching, learning, and writing in previous years (if any), researcher's closing remarks, and a summary of findings.

Chapter 3

“Figuring It Out”: Learning to Write the Reflective Journal in Year 1

Year 1 Assignment Description

The first year writing assignment was titled *Reflective Journal*.⁵ The reflective journal was a component of the students’ class portfolio and part of the Evaluation of Nursing Practice (ENP). Figure 1 shows the assignment description; the second bullet point on the bottom of the page provides a definition of the portfolio with an estimated due date and suggested format, and notes that the portfolio is “comprised of practice reflections.” Figure 2 shows further details of the assignment; this description was less than one page and included one paragraph of writing tasks, and listed three expectations for each journal entry. An “assignment marking description” was also provided (Appendix H). All assignment and marking descriptions in this chapter are used by permission of the case study Faculty.

⁵ Assignment descriptions differed slightly between documents. The course outline used the term *reflective journal* and Appendix A of the course outline used the terms *journal of reflective practice* and *reflective journal* interchangeably. The evaluation section of the course outline called this assignment the reflective journal, and this thesis will use *reflective journal*.

Figure 1

Year 1 Reflective Journal Assignment Description from Course Outline

5

6. Participate in post-conference, Fixed Resources Sessions, lab activities, and clinical placements.

Clinical Experiences

1. **Schools** – Students will be in a school classroom and will participate in the school *Study Buddy* program under the direction of a teacher. As well students will have the opportunity to participate in after-school programs and health promotion activities. Students will assess the growth and development characteristics of the children, participate in classroom activities, and interact with the children and teachers about health related needs. School sites also become central to community projects and home visits.
2. **Community Agencies** – Students will be in community agencies and will participate in agency activities, engage in health promotion activities, and interact with clients about health related matters. Community agencies are central to community projects and home visits.
3. **Home Visits** – Each student will collaborate with one family and will conduct three home visits with that family. **NB: Home visits are to occur outside of the planned activities of the clinical settings.**
4. **Community Service Experience** – The students will engage in an activity in the inner city of Edmonton focusing on the determinants of health. As well the student will participate in experiences that will guide their learning of working with culturally diverse populations .

REQUIRED EVALUATION

Evaluation of student’s clinical performance (ENP) (available through eClass Module)

1. **A formative and written summative Evaluation of Nursing Practice will be completed by the student and the tutor. This is a Pass/Fail.**

This will be accomplished through observation assessment and evaluation of the student during nursing practice. Evaluations will be made by the tutor and may be supplemented with input from peers, the staff of an agency, and the client(s).

- To encourage the development of self-reflective practice, it is recommended that reflective practice, nursing care and learning plans be evaluated through discussion during the clinical day and post conference.
- As part of the course a portfolio is kept. A portfolio is a collection of the student’s experiences as a student Community Health Nurse. The portfolio is a means to describe and illustrate the learning process through the course. It will be handed in at the end of the course. The format is individualized as it’s an opportunity to present learning progress in a creative way. A suggestion is that is assembled in a small binder or holder with section dividers. The portfolio is comprised of practice reflections, copies of any *products* produced during your community practice and includes a reflective journal (Appendix A).
- The evaluation also includes engagement in health promotion activities by the students. Health promotion activities are jointly planned with the clinical tutor and can be agency, tutor or student initiated. Each health promotion activity should include an assessment and evaluation component. The format of the assessment and evaluation is individualized and

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*Figure 2**Year 1 Reflective Journal Assignment Description from Appendix*

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Appendix A
Journal of Reflective Practice

A Journal of Reflective Practice reflects a response to specific guiding questions posed by the tutor. The tutor will provide guided questions. Questions are related to the application of theory to practice and encourage the student to critically reflect on their clinical experience. The reflective journal provides ongoing practice reflection to ensure accountability, theoretical application, and critical reflection of community health nursing standards. Tutors may ask for written or verbal journals.

Expectations for each journal entry are:

1. Use APA 6th edition to format your journal and references.
2. Journal entries should draw primarily on clinical experiences. However, journal entries need to be supported through using evidence from the literature. Literature incorporated must be included in a reference list.
3. The Journal is a component of the ENP and journal entries can be used in the self evaluation component of the ENP.

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The written instructions in the course outline communicated the following reflective journal assignment details: mark value (pass/fail), content requirements, style, format, writing tasks, and marking expectations. Students could negotiate the following: due date, format, length, and journal type (written or verbal). Depending on the negotiated due date, the students had five to seven weeks to complete the reflective journal assignment from the first day of class. There was no explicitly stated topic or purpose of the reflective journal in the course outline. Although not explicitly stated, the reflective journal was a recurring, weekly assignment, due in about six weeks time, the audience and marker was the student's instructor, and the students were given opportunity to receive in-process feedback from his or her instructor.

The written instructions provided a working definition of the portfolio (not the reflective journal per se): *A portfolio is a collection of the student's experiences as a student Community Health Nurse. The portfolio is a means to describe and illustrate the learning process through the course.* There was a descriptive function of the reflective journal in the fourth sentence: *The reflective journal provides ongoing practice reflection to ensure accountability, theoretical application, and critical reflection of community health nursing standards.*

There were several indirect writing tasks/prompts:

- *A Journal of Reflective Practice reflects a response to specific guiding questions posed by the tutor;*
- *Journal entries should draw primarily on clinical experiences;*
- *[J]ournal entries need to be supported through using evidence from the literature;*
- *Literature incorporated must be included in a reference list; and*
- *Use APA 6th edition to format your journal and references.*

Year 1 Participants

There were seven (7) first-year participants who responded to the call for volunteers. The four (4) students were Alyssa, Brianna, Jasmine, and Lea and the three (3) instructors were Sally, Sandra, and Patricia. For the purposes of this case study, which was exploratory in nature, my doctoral advisory committee and I agreed not to collect personal or demographic information such as age, ethnicity, GPA, academic standing, teaching tenure, or the like, so that I could focus on exploring interactional aspects that enabled/constrained how students learned to write this assignment. Therefore, no descriptive information about participants is provided in this thesis.

Students and instructors were not asked why they participated in the study but all of them expressed a desire to provide the Faculty of Nursing with a better understanding of the way the writing is currently taught in first-year nursing. Participants openly affirmed the need for this writing assignment research. By participating in this case study, they hoped that the Faculty of Nursing would seriously consider their points of views, suggestions, and experiences of teaching and learning the reflective journal writing assignment.

Three nursing students, Alyssa, Jasmine, and Lea, brought with them to the interviews additional documents that they felt influenced their learning to write the reflective journal assignment: *Learning Plan* template and a condensed version of *Competencies and Year-end Outcomes* (Appendix I and J respectively). Participating instructors also freely shared additional teaching documents they created on their own and gave to students in their respective course sections. One instructor, Sally, created two documents that she believed helped her classroom teaching: *My Philosophy and Student Expectations* and a *Student Profile* sheet (Appendix K and L respectively). Another instructor, Sandra, adapted a template that she actually used when she was an undergraduate nursing student and thought it might help her students write the reflective

journal: *Reflective Summary of Clinical Shifts* template (Appendix M). All additional documents in Appendix I through M are used by permission of each participant and the case study Faculty of Nursing liaison.

Year 1 Data Analysis

The Year 1 student and instructor interviews began by asking: *What was your experience of writing [teaching] the reflective journal in [name of course]?* This was the question that guided the year 1 data analysis stage and helped identify categorical themes of teaching/learning to write the reflective journal writing assignment. Interviews with all seven (7) participants were transcribed verbatim and read three times each by the researcher. Before coding began, the transcripts were emailed to participants for review and approval. After participant approval, interview transcripts were coded and followed established principles of inductive content analysis (Neuendorf, 2002; Krippendorff, 2004a). Mayan's (2009, pp. 93-98) latent analysis process was used to code and categorize each transcript. Transcripts were coded in a concurrent manner through an iterative process of data collection-analysis-data collection-analysis. After all transcripts were coded, the researcher discussed emerging categories and points of interest in a committee conference with doctoral advisors. The primary goal was to guide the categorical development phase rather than achieve consensus on categorical themes. Next, the transcripts were aggregated into NVivo®, a qualitative analysis software program that created tags, themes, frequency counts, and links to synonymous categories. All categories were converted to major themes (or nodes with tags) and the query sets were exported as a table to help organize findings.

Findings were triangulated in two ways, first through informant-validation (Sandelowski, 1993; 2000) and then through formal consultation with an interdisciplinary panel of specialists (Krippendorff, 2004a; 2004b). Informant-validation was included as an error-reducing measure

and strictly meant to receive endorsement of the categories and how those categories would be presented in this chapter (Altheide, 1996; Altheide & Schneider, 2013; Boeije, 2002). According to Krippendorff (2004a, pp. 87-88; 2004b, p. 429), it is normal to recontextualize, reinterpret, and redefine the research so long as it is representative of the dataset in question. Findings were discussed with an interdisciplinary advisory committee of three specialists from nursing, education, and writing studies research. Each had research careers that reflected the purpose and objective of this doctoral case study. The committee ensured that both the data collection and interpretation were appropriate and within the study's proposed objectives. Discussion included the researcher's awareness of evolving patterns/themes and decisions of categorical themes in this dataset (Year 1). According to Findlay (2002) and Pillow (2003) it should be standard qualitative research practice to discuss the researcher's decision-making process with an accountability committee during the analysis stage, so that the researcher is highly attentive to, or *reflexive* about, how and why he or she makes decisions and interpretations along the way.⁶ Finally, participants were asked to review a brief summary of Year 1 findings and invited to add further comments, thoughts, and/or ideas. There were no additional comments.

Year 1 Findings

Almost all participants used a variation of the following phrase: *teaching and learning to write the reflective journal is like learning a new culture*. Sandra's response framed well the overall sentiment of all the instructors:

Learning to writing reflectively in first-year is really like learning a new culture. The terminology and the way everything is used are different. Not a different language but the

⁶ Qualitative researchers in education and healthcare also use the terms *reflexive*, *reflexivity*, and *reflexiveness* to describe the process of being highly attentive to how and why researchers make decisions and interpretations along the way. Clinical researchers McNair, Taft, and Hearty (2008) claim *reflexivity* acknowledges how a researcher's contribution to knowledge is a construction of meaning and embedded with his or her influence on the analysis results.

way terms are used is different. There is going to be a little culture shock in students' first year [but] they assimilate [and] by the time they graduate, it is second nature. As a first year teacher, I am introducing them to the culture of nursing. We are preparing students to be part of the culture in that sense.

Students also recognized a distinct culture of writing in nursing. Two categorical themes emerged from the interview data: "figuring it out," meaning the things that helped students learn to write reflectively, and "still can't figure it out," meaning unresolved challenges, frustration, or confusion regarding reflective writing. The next two sections will focus on the students' voices and interject the instructors' voices where applicable.

Figuring It Out

There was agreement among all four students that their first year of nursing was a year of trying to figure things out. Jasmine, who had two prior years of university experience before enrolling in her first year of nursing, summed it up like this:

[P]rogress here is dependent on tutor feedback and if you don't understand the way you need to write in the faculty, you won't do well. So, you have to figure it out. . . . and it's kind of tricky. What seems superficial at first isn't superficial. You have to make those connections. You have to say, okay, what's the point of this assignment? Why do the faculty want you to do this? And it's kind of hard, because you either make those connections or you don't. So, it's like sink or swim. It's a good theory, I think, to require us to figure this out for yourself and it's good to start developing these skills 'cause it's the sort of stuff we're always going to have to do throughout nursing. But, it is a bit overwhelming in first year. Some stuff I am still trying to figure out.

So, what *stuff* did participating first-year nursing students try to figure out when attempting to write the reflective journal assignment? Students tried to figure out what was most helpful, useful, and beneficial to their own learning success. They reported (or figured out) three key things helped them learn to write: strategic talking, feedback from the marker, and assignment supports.

Strategic talking. When attempting to write the assignment, all four students said, “Talking helps me.” When asked what kind of talking and with whom, students reported that they were self-selective and strategic. They were particularly interested in talking with those who ultimately impacted their own grades and affected their progress as nursing students: the classroom instructor⁷, nursing peers, and trusted family members who were in the nursing profession.

Classroom instructors. Students talked with their classroom instructors most often to clarify instructions and marking expectations. Students also claimed that clarifying the reflective journal assignment instructions was not something they necessarily wanted to do but felt they needed to do. They were trying to adjust to what they called *tutor preferences*. Students admitted that before entering the baccalaureate program, they were not expecting instructors’ writing perspectives to be so subjective, personal, and different from one another.

Jasmine said it was not easy to adjust to the subjectivity of writing a recurring genre for an intended reader and adapt to a reader-centered genre. Furthermore, the reflective journal was assigned in every course and each course had a different instructor, each with his/her own personal perspectives of student writing. Jasmine’s instructors’ expectations of how to write the journal differed dramatically from Jasmine’s own perspective. Jasmine explained, “Writing the

⁷ Classroom instructors are also called *tutors*. Therefore, classroom instructor and classroom tutor may be used interchangeably throughout this and subsequent findings chapters.

reflective journal in one course is not like writing it in another. I wrote it one way in [course A] and wrote it the same way in [course B] and got torn apart.” That, she claimed, taught her to clarify her instructor’s marking expectations before she began to write it. She continued,

If I followed the outline and guidelines to a tee, I would not do well, because a lot of what [the instructor] wants is not in the outline or guidelines, but it’s an expectation. Like for this assignment, *Reflecting on My Practice*, I have the nursing competencies; they were given to us. But [my instructor] wanted me to *list* what went well, what could I do different. She wanted me to *list them*. That’s not in the instructions.

Lea figured that she should not even follow the written instructions any more. She claimed, “In all honesty, I no longer read the assignment instructions because every [instructor] is different. I just go off what [my instructor] says in class.” This was a departure from Lea’s normal protocol for learning. She continued,

When I took my psychology course, I read through everything because I knew the instructions were written by the professor. The professor was the one who wrote the course outline. [Lea points to the reflective journal writing assignment instructions on the table] But this is written by the faculty.”

Lea’s observation was correct in that the writing assignments were not created individually by each classroom tutor; they were developed by the teaching team, which comprised of all the course tutors who teach all the section of this course. From Lea’s perspective, it seemed that every tutor had his/her own interpretation of the assignment. I asked Lea, “Did you pick up on this right away in your first nursing course?” She replied, “Oh no. It’s really hard. Figuring out that every [instructor] teaches very differently is hard. It’s not just me interpreting the

assignment instructions, it's how my course [instructor] interpreted the instructions, right? This is like a maze. I can figure it out, but it's tricky."

Alyssa was figuring out how to ask questions, and emphasized that learning how to ask questions required patience—and lots of talking. She realized,

You know, I've been in university for two years, but I still have to learn to ask questions in context. That's why I just sit down and talk with [my instructor] before I start writing.

I have, like a million questions. Some things may be the same from last semester, some things may be different. I've learned to just *clarify everything* and ask question. But it's not so simple to figure out. I have to learn the *right* questions to ask. [student's emphasis]

Alyssa recognized that asking questions was in itself a learning process. She was also becoming aware of the rhetorical and pedagogical significance of this clarification process with instructors.

In fact, all four students emphasized that learning how to ask questions was a critical, yet unexpected, part of learning to communicate with their instructors and understand expectations.

Alyssa summed it up best,

You have to learn to ask better questions. Even when the tutor says, 'do you have any questions?' we don't know how to get those questions out to clear up any confusion.

Sometimes tutors give you hints, sometimes they don't; sometimes they are specific, sometimes they are vague. So, I have to figure it out. Which is not always the easiest, either. . . . I just have to ask better questions. Otherwise we don't communicate [well with each other] about what she expects of us from the journal.

Participants also had what I call student-centered conversations with their instructors about things *other* than assignment clarifications and expectations. Student-centered conversations had a direct affect on improving Brianna's writing. Brianna recalled how she

learned to write her journals “just from talking a lot with [her instructor].” When asked what she talked about, Brianna answered with a very insightful observation of first-year learning and what it's like to be a first-year nursing student adjusting to university writing demands. She said,

I talk a lot about my struggles because the first-year program, well, it's intensive. High school students are not necessarily ready for the intensive writing we have in this program. We aren't necessarily the best at like analyzing our actions and how our actions impact situations and how learning ties in [with writing a journal]. It's hard, really hard, and different than [writing] in high school. I'm not really the type of person to sort of have an experience and then think on it after. Talking a lot with [my instructor] helps because she offers helpful hints. . . . It's a slow process, but by the 5th or 6th journal entry, I catch on.

Jasmine remembered one conversation where her instructor helped identify Jasmine's strengths as a student nurse in training. Jasmine recalled,

Talking with [my instructor] helped me see what I'm good at, what my strengths are. . . . [My instructor] said that I am very good at commonsense kind of things. Which, at first, I didn't think was a big deal. But, apparently it is. She pointed out that the way I analyze a situation, figure out a solution, and communicate it is important to being a nurse.

Jasmine and Brianna both exemplify the impact that one or more conversations can have on a first-year student learning to write in nursing. In Brianna's case, multiple conversations with her instructor enabled Brianna to think more meta-cognitively. Brianna concluded, “Talking a lot with [my instructor] seems a bit tedious, actually, but it triggers how I can think more about what I'm learning right now.” In Jasmine's case, the conversation with her instructor sparked more

rhetorical thinking. Jasmine concluded, “I know I talk to [my instructor] a lot, but talking helps me make sense of the reflective journal and the point of reflection and why I’m doing the exercise. Otherwise, I’m just doing it blind.”

Nursing peers. Students talked frequently with their peers to “help each other out” and started building trusted student networks. They often talked with each other to compare one another’s understanding of instructor expectations and collaborated on creating and revising their drafts before turning it in for a grade. Grades, by the way, were an important factor in peer collaboration. Lea collaborated often with her peers not only because it helped her better understand what’s expected of her as a nursing student but it improved her marks. Lea described,

A lot of times teachers can be vague. When you don’t understand something, what you do to learn it is talk to your peers. We help each other out a lot. Like with [finding] documents [on Moodle] . . . or trying to incorporate nursing competencies. I can grab those [competencies] really quick [and put them in my journal]. But our tutor wants us to pick the two that *best* apply and explain why and describe what the competency means in context. It’s a lot more thinking and time involved. So, I ask one of my classmates, ‘is this the best competency for communicating with patients?’ She’ll say, ‘yes, it was fine, but you didn’t really go into describing the issue with [the patient’s] medications.’ . . . I definitely noticed that this feedback from my peers changes [i.e., improves] my marks because tutors are looking for this.

Jasmine used a more iterative peer-feedback process with her best friend and perceived that talking with her best friend actually improved her reflective writing skills, a skill she would need in later years. Jasmine and one of her best friends used email to exchange, compare, and revise their written drafts as a form of continuous peer feedback. The on-going cycles of peer

feedback also served as an accountability measure for meeting assignment criteria. Jasmine described,

Journals reflect a lot about who you are as a person, what you're interested in, what you care about, [and] it goes into what you want to do as a nurse. And that goes on in every year, right? So, to sort of improve our writing, we sort of give each other feedback. What we actually do is look at the differences in how we've done the assignment. I'll say, 'I think that you addressed the situation but I don't think you addressed future implications,' or she'll tell me what she didn't understand [in my reflection], and I'll revise it. We'll just keep emailing it to each other until it's due, which I find really helpful because we help each other see criteria that we missed.

Meeting criteria appeared to be the real concern for participating students. Any talk of improving their writing was directly correlated to meeting or exceeding marking criteria. Participants were extremely cognizant that they were writing for one intended reader, their classroom instructor. So, it was important that they consulted and collaborated with other peers who were not only aware of the marking requirements, but also familiar with the individual instructor who would be reading and marking the student's reflective journal. Jasmine was adamant that only trusted classmates within this faculty read her drafts. She did not take advice from peers outside this faculty because reflective writing in nursing was written differently than in other disciplines. She insisted, "We have to approach reflective writing in a certain way and address the situation a certain way, and people outside the faculty don't know that, unless of course you're a nurse."

Family members. One student, Alyssa, had someone outside the faculty that she could trust. Alyssa found it helpful to talk with members of her family (who are in the health care profession), especially her Mom, who is a nurse. Alyssa explained,

I talk a lot with my family. Especially my Mom. She's a nurse and knows how to do a reflection, because she does it every year with CARNA. I usually go home and unload about what happened during the day and I talk about what was frustrating. That's my method of dealing with things, especially the challenges. There [are] a lot of things that stand out for me after every clinical shift. My tutor gave me a summary sheet to write my reflections, but I don't use that because it's a lot of work to do that after clinical shift. It's easier for me to talk to my Mom instead of writing it all down.

There are a lot of relational-emotional overtones in Alyssa's statement, evidenced by phrases such as *unload*, *frustrating*, *dealing with things*, especially the challenges. On the surface, she's using school jargon, such as *writing is a lot of work* and *it's just easier to talk* about her clinical experience than to summarize it in writing. But the jargon is imbued with emotional, even visceral, responses to clinical experience(s) of being a nursing student.

The reason Alyssa preferred talking with her Mom rather than writing a summary was not necessarily because talking was easier than writing. She needed to connect viscerally to another person she could trust with her "learning journey" (Brookfield, 2006, p. 75; see also the development of connected knowing and the mother-daughter relationship in Belenky, Clinchy, Goldberger, & Tarule, 1997, p. 183). Alyssa did not get this immediate emotive connection with writing alone. Alyssa felt that writing was actually a lonely and "boring" process. Talking with her Mom (a professional nurse) who could relate to Alyssa's clinical experience provided a

human, empathetic, and interactive connection to learning about nursing. That interaction not only motivated Alyssa but encouraged her to *want to write*. Alyssa elaborated,

I talk to my Mom because, in long-term care [Alyssa's clinical placement], there is a lot to reflect on, because we're doing care and we're talking to people and, I find that clinical is more focused on conversations and interacting. So, . . . I always come home from clinical days and blab to my Mom, especially on challenging days. I talk about the social issues, about what happened with the people, what I found interesting, and what I want to write about [in my reflective journal]. After you talk about it, then, you *want* to write about it.

As Alyssa alluded to, her need to talk before writing was more than a *prewriting* exercise (cf., Emig, 1977; D. Graves, 1975; Hillocks, 2009). Studies from Education and Psychology would call *talking before writing* a specific kind of developmental skill for first-year students.⁸ Williamson's (2008) research-based guidebook on impromptu writing, observed that adolescent students are attempting to develop *translation skills*, meaning students are exploring ways to translate "verbalized ideas" (p. 2) into writing. Students are developing their own organizational strategies for translating complex information into words and sentences. Talking is a way of thinking aloud, and thinking aloud is a way of organizing information into sensible, recognizable patterns. For first-year nursing students in particular, thinking aloud with trusted individuals like nursing peers, teachers, and family members, is one of the most important elements in how first-year students make sense of the challenges they face. Williamson suggested that students will

⁸ There are three specific kinds of developmental skills worthy of mention: *translation skills*, *coping skills*, and *summary skills*. For purposes of this thesis, I highlighted *translation skills* (Williamson, 2008) in the main text. For *coping skills* see Pennebaker's (1997; 1990) studies of how students cope with the transition to college as a major life-change. Talking before writing is not merely an expressive activity but a form of emotional disclosure and coping device when experiencing high levels of stress. For *summary skills* see Taylor's (1984) "Different summary skills of inexperienced and professional writers" where he learned inexperienced writers require talking before writing.

listen to their trusted partner's response and, in the process of listening, conceive alternative ways to approach topics and create connections that they otherwise may have overlooked on their own. Williamson (p. 2) concluded, "Ultimately, the most important element is that the process of learning to think aloud with teachers and peers leads to the internalization of procedures, processes, and patterns of thinking that result in better written products. In the long run, internalization contributes to more independent learners who know and can flexibly apply the secrets that proficient writers use."⁹

Feedback from the marker. Next, students reported that feedback played a key role in figuring out how to write the reflective journal. Participating students were keenly aware they wrote their reflective journal for an intended reader, who also happened to be their course instructor (or tutor) who marked their reflective journal assignments. So, it is important to note that students' perspective on feedback was influenced by that relationship and context of evaluation. Students' reception and perception of instructors' feedback, without exception, affected the student-teacher relationship.

Participants wanted to be clear that, in general, first-year nursing students received "a lot of helpful feedback" and preferred (and received) both written and spoken feedback for this type of assignment. Students tended to interpret "on-going feedback" as a way to learn the instructor's "preferences and expectations" for marking and viewed feedback as a form of guidance, advice, coaching, or direction on "the right way" to write reflectively. Students also favored guidance, advice, and coaching directly from the instructor, even when other knowledgeable individuals were available. I would like to highlight one of Jasmine's comments on seeking feedback. It

⁹ Williamson's (2002) conclusions are based on two specific case studies: Baker, Gersten, and Graham's (2003, p. 116) study of teaching writing to students with learning disabilities, and Reynolds and Bruch's (2002) study of first-year college students' approach to learning writing. Findings from these two case studies parallel those in my own case study of first-year student writing in nursing education.

provides some insight into the dynamic perception of a first-year nursing student learning about reader-centered writing in nursing. Jasmine quickly decided that there was only person fit to provide “the right kind” of guidance on how to write the reflective journal. She said

My instructor is the one person in the faculty that knows this assignment and is aware of what is expected. I don't even talk to peers. Seeking feedback from your peers is like the blind leading the blind, essentially. Seeking feedback from librarians is helpful with research but not helpful with assignments like this. Centre for writers is helpful with APA and the flow of your writing but they have no idea what the faculty are looking for in an assignment like this, so not helpful there. Our writing seminar that we had in [another nursing course] was helpful for the scholarly paper but it doesn't transfer. So, I think there is only one person, especially in first year, [who] can provide enough guidance to write this assignment, and it's [my instructor].

Guidance was extremely important to these participating students. I asked them to provide examples of what they regarded as useful or helpful guidance. Participants claimed that, if they were to write well, they needed to receive specific examples, timely feedback, and “good” feedback from their instructors. Interestingly, students said that all three of these, together, helped them to communicate more effectively with their instructors. However, the combination of the three was usually idiosyncratic.

Specific examples. First-year nursing students need instructors to provide specific examples and explanations in the context of the content. Alyssa found it extremely beneficial when written feedback included specific examples that were also thoughtfully explained by her instructor. She recalled a time when her instructor carefully explained how to differentiate between *listing* nursing competencies and *applying* nursing competencies. Her instructor

explained the difference(s) with specific examples that tied directly into Alyssa's journal content. Specific examples and explanations helped Alyssa develop a clearer understanding of how to write in the context of the content and to facilitate her revision process more independently and confidently. Alyssa explained it this way,

When I look at nursing competencies, I am overwhelmed. There are so many. I just keep listing them all. When [my instructor] said, that I didn't have to list them all, she explained how to do it. All I have to do is pick the one or two that best applies [to my clinical experience that day]. Then, she gave me a specific example using one competency. And I said, 'Oh, yeah, that relates.' She explained what this competency means [in context of my clinical experience]. Now, [when I write my journals], I actually pick the one or two that best applies [to my clinical experience during that week]. Then, I have to really look at those two competencies and explain [them in context]. I have to really think what this competency means. It's hard. But, I'm figuring it out with each journal I write. I'm learning how to applying them.

For Alyssa, having a specific example that was carefully and contextually explained helped her to write and think more professionally. In a way, it bridged the gap between nursing student and nursing professional.

Lea had more precarious assumptions about how to write a reflective journal in her first year of nursing. Two things helped reassure her uncertainties. She received guiding questions and specific samples from her instructor. She recalled a day when her instructor brought to class samples of reflective journals for the students to look through. Lea said, "First, [our instructor] gave us guiding questions before we even started the assignment. That was helpful because they were specific. I like knowing what to focus on . . . otherwise, I go into an assignment blind."

Then, her instructor showed the class specific samples of journals that incorporated those guiding questions into the reflection. Lea described,

[My instructor] showed us some examples. That help[ed] me to know what direction to take my own writing, especially at first when I'm not so sure. . . . [Our instructor] brought us a binder with sample assignments that we could go through . . . and then she went through specific examples of how we could tie our role as a nursing student [into] that of a community health nurse.

Together, the guiding questions and samples with specific explanations, given before Lea started writing, helped Lea learn more about her instructor's expectations of content. It also eased Lea's uncertainties and built up her confidence to write nursing-specific content. Lea continued, “

What I found most helpful about the specific examples is that she explained what to focus on. And those guiding questions helped with that. That was helpful knowing she wanted the focus on our experience as opposed to the theoretical aspect. That's how I knew what direction to take my writing.

Timely feedback. The timing of the feedback was critical to learning the reflective journal as a recurring and reader-centered genre. Students reported that timely feedback came both *before and after* the assignment was due, meaning they received feedback on completed journal entries *before* the next journal was due. Receiving timely feedback reduced students' anxieties regarding marking and motivated students to participate in learning the genre. Jasmine shared an example of untimely feedback, in order to make her point that the timing of feedback was an important part of reducing her anxieties about what was expected in each of her journal entries. She recalled,

I remember last semester, we handed in our paper copies of our journal entries at mid-term . . . we handed in our *only* copy, so we couldn't refer to it [as we continued to write our weekly journals]. That was a little stressful. . . . By the time we'd received feedback, our next reflection was already handed in. . . . I didn't like that because I didn't know what was expected of me. So . . . I just hoped that I did it right the first time. I don't want to go into writing the next journal *hoping* it's right, I want to know what's expected of me before I write again.

For Brianna, timely feedback came in three different yet complementary ways. First, Brianna's instructor returned feedback within 12-24 hours. That helped Brianna feel more prepared to write the next journal. She said, "Yeah, she gave me feedback like 12 hours after I handed it in. It's crazy. That doesn't happen usually, but in this case, it was really helpful because she provided more feedback that helped me write my second journal." Second, Brianna's instructor explained written comments. Brianna said that every time her instructor handed back written comments she reminded students, "if you have questions on my feedback, just ask me, and I will explain anything you need." Brianna liked this because it eased her anxieties about reading comments she didn't understand. Brianna said, "Not every tutor can explain their own feedback like [my tutor]. She explained it really well." That additional spoken feedback complemented the written feedback in a way that guided Brianna's writing and revisions. Brianna continued, "It's nice to be given the chance to discuss the feedback especially before the next journal is due because you have some guidance to sort of edit your journals and adjust your learning goals."

Third, Brianna's instructor provided students with an opportunity to revise their journals and hand them in again. Brianna often chose to revise her journals because she said that it gave

her a chance to practice writing. However, there was also an emotional-relational component to Brianna's revision process. Brianna was seeking her instructor's approval. She would often revise in order to receive key expressions of approval by her instructor. For instance, Brianna recalled several approval statements from her instructor, such as, "This is awesome, Brianna. I loved the way you explained this." "Brianna, this is so clear, so concise, so to-the-point. I'm glad you revised it this way." "Great revision, Brianna. I see you really understand X and how that applies and that you understand what we're looking for." These comments may or may not have been verbatim from Brianna's instructor(s), but this was the way she remembered them. As a result of timely feedback, those revisions and additional comments obviously made Brianna feel good, eased her uncertainties about reflective writing, reduced her marking anxieties, and motivated her to participate in learning the genre.

"Good" feedback. Participating students claimed that *good* feedback elicited a direct and empathetic response from their instructors. Students reported that the typical feedback provided advice and remarks on nursing competencies and marking criteria. But good feedback, more directly, validated the student's perspective and acknowledged what the student was attempting to communicate. Jasmine explained it this way,

When I turn my [weekly] journal in for feedback, [most instructors] make the usual comments. They usually comment on the techniques I listed, what the implications [were], or what I'll use in the future. That's the normal sort of stuff that they look for. But [in this course, my instructor] responded to a place in my journal where I was trying to identify my feelings about being impatient. She commented on how I was trying to communicate concepts that are important [in the nursing profession]. She could see my perspective. . . .Yes, of course, I want to know if my practice meets nursing standard, but

I also want to know that . . . you understand my perspective. [My instructor] has that perspective of all of us, and I think that's kind of part of the reason we write better, because she's so supportive and can see what I'm trying to say.

Alyssa felt the same about instructors' "usual comments." She also revealed important relational dynamics at play between student writing and instructor response. Alyssa used her instructor's written response as a way to gauge her instructor's approachability. Alyssa wanted her learning to go beyond her writing and to engage in a conversation about her learning and writing experiences. In order to engage in that conversation, she needed a place to start. Short, vague comments actually left Alyssa feeling disengaged from further dialogue with her instructor. Alyssa revealed,

I need to know that my tutor read my journal. Comments like 'good reflection' don't tell me you've read anything I've tried to say. But when my tutor takes the time to respond to what I'm trying to say, I know she's read it. . . . And in this clinical, [my writing is] all over the map; I know [my] journals can be hard to follow. But she reads it. She responds to what I'm trying to say. *That's* when I know she's really approachable. I can talk to her more; I can follow up; I can walk up to her at lunch break; I can walk up to her any time I have a break, or any time, actually. That's important to me.

Jasmine and Alyssa spoke directly and candidly about what was important to them. They talked openly about what they wished they could say their instructors but never do. Things like, "Do you hear what I am trying to say?" "Do you see my perspective?" "Does anything I say mean anything to you?" For these first-year nursing students, direct and empathetic response is what defined "good" feedback, because such a response validated students' efforts and attempts at writing reflectively about new and challenging clinical experiences (cf., Holmes, Marchant, &

Petersen, 1999). Moreover, direct and empathetic response validated students' emotional and relational needs of communicating effectively with their instructors in a cooperative learning community. In essence, students are trying to develop "interpersonal and small-group skills needed to establish and maintain healthy relationships, manage emotions, and internalize the prosocial attitudes and values" of the nursing discipline and profession (Johnson & Johnson, 2006, p. 41).

These first-year nursing students identified the same excellent point that educational researcher Arthur Applebee brought up over 30 years ago. Applebee (1981, pp. 90-91) wrote that teachers' comments were the "major vehicle" for students' learning and writing development, and good feedback was central to the student-teacher relationship. Since then, writing scholars, educational researchers, and nurse educators have provided useful and reliable insights on what constitutes good feedback (see Agius & Wilkinson, 2014; Anson, 2012; and Beach & Friedrich, 2006 for excellent overviews). There has been much analysis of teachers' written and spoken feedback, end comments, marginal commentary, praise, criticism, positive/negative voice, and the underlying developmental models conveyed through teachers' evaluations and advice. But, as Hyland and Hyland (2006) emphasized, little research over the last 30 years contributes to our pedagogical understanding of the student-teacher relationship and relational response of the feedback process.

Case studies like mine attest to the relational dimensions of the feedback process that can directly affect the trajectory of undergraduates' professional development (Anson, Horner, & Chaudoir, 2014). Student participants in my case study specifically talked about instructors' responses as interactions that involved various, often numerous, emotional-relational aspects that had an indelible impact on first-year students' reading and writing skills and were critical to

advancing the students' participation in the community and discipline of practice, which is the way that participating instructors saw it as well. Sandra confirmed, "This [reflective journal assignment] is about relationships. That's what learning is all about." She wholeheartedly believed that no other assignment was better suited for learning how to write like a nurse. She continued,

This is a perfect assignment in learning how to be a nurse because we have an opportunity to focus our feedback on what nursing is all about in practice and why nursing is important and how learning to write reflectively relates to being a nurse. That is very clearly in line with curricular objectives. Equally importantly, the [reflective journal] connects us to what students are going through emotionally.

The other two participating instructors, Patricia and Sally, concurred that emotional-relational aspects of learning have an indelible impact on student learning. They also noted that in a context-based and self-directed learning curriculum, emotions may run strong. They both emphasized the role of feedback on the emotional side of learning and how that was manifested in different ways for each of them as tutors. For instance, Patricia reasoned that she could not turn a blind eye to the emotional side of learning. She maintained,

Giving feedback is a time to listen to students. This is an emotional time for them, especially going to the Mustard Seed [one of the field locations where students wrote their reflective journal]. This is the best time for me to see how they are learning, and they are amazing at describing their emotional reactions to a situation, but they have to learn how to come to a conclusion about that situation. They have to learn to think like a nurse, and as their teacher, I guide students' emotional side of learning, I don't turn a blind eye to it, in fact, I love this opportunity to do that.

Sally also loved the opportunity to teach first-year nursing students. However, she also identified the constraints on giving individualized feedback. Sally explained that giving feedback to students is not only complicated in a curriculum with intensive writing requirements and short courses (six weeks) but also frustrating and emotionally draining. Sally said she felt like a sergeant on a battlefield rather than a tutor facilitating nursing students' education. She explained,

Feedback means giving students time. Students need time to reflect on the rationale of assignments, the appropriateness, and wade through the amount of writing they are asked to do. We can help them with that and we *want to help them* with that [instructor's emphasis]. But, as tutors, we're also trying to level [our marking] between sections, articulating our needs as tutors, and providing feedback to coordinators and curriculum administrators, all in a very short period of time. We're trying to give feedback to students, feedback to coordinators, and build relationships with all of them, which is emotionally draining. It's like a battlefield of sergeants reporting back headquarters, trying to take action. We just want to know where we fit in the curriculum.

Assignment supports. Lastly, students reported that assignment supports such as templates and guidelines helped them learn to write and complete the reflective journal assignment. Figure 3 (next page) shows the template that students in this study used to complete the reflective journal.

Students reported that having templates like the one shown in Figure 3 benefitted them in three ways. First, it helped them to get started with writing the journal. Alyssa recalled the first time she used the template. It helped her get started right away. She did not have to worry about the formatting and style. Once she started using the template regularly, it helped her to think more deeply. Alyssa explained,

Reflecting is such a big part of nursing, and I appreciate these templates. I think it has been a good way to make me think about what I'm doing [with patients and standards of practice]. It's easy to sit against the wall . . . I mean, if I were writing on my own [without the template to guide me], I wouldn't think about the things they want me to think about.

So, this gives me some guidance on how to go about that.

Lea also liked the guidance of the template and found it very dependable. She followed the template "to a tee," exclaiming that, "if I follow the template, my writing is usually pretty solid." Having something to depend on was exactly what Brianna needed, too. As a first-year student she was experiencing writing her assignments independently. Previously, in high school, she said, "We always worked together on assignments," but, now that she was in her first year of university, she often felt alone, on her own, and without much writing support. Brianna said that having the template available was sort of like having a companion that guided her writing.

Second, the template provided students with a starting point from which to ask questions in class. In a way, students viewed in-class discussion as a necessary supplement to the template. The template was beneficial, but the template alone was not enough. Students needed additional explanation in class. During my interview with Jasmine, she pulled out one of her reflective journals that used this template. She exclaimed, "[Our instructor] is awesome because she uses

class time to go over the template in class.” She started telling me that from those discussions she gained a better understanding of how to write more concisely about her clinical experience(s).

Jasmine also learned how to communicate important functions of patient-nurse relationships, such as using patient initials to maintain patient confidentiality and anonymity. She pointed to the first bullet on the template sheet, *Description of a situation*, “It says right here, use initials to ensure confidentiality. And here, it tells us ‘describe what happened.’ Pretty straightforward, right? Yes. But I can’t just [describe the situation and] go on forever. I have to do it in a few sentences. That takes some practice.” It also took some in-class discussion with her instructor, who Jasmine claimed, was very good at using the template to explain the disciplinary content in the context of the professional expectations.

When I asked Jasmine what was so helpful about going over it in class, she elaborated on parts of the template that were “not so straightforward,” and writing prompts that challenged her thinking and writing skills. Jasmine pointed to the third bulleted writing prompt on the template, *Which nursing practice competencies apply?* She replied, “This is one part of the template that’s not so straightforward. It’s difficult because there’s such a wide range of knowledge and competencies and what [students] understand, even in a [class size] of eight.” Then, she pointed to the fourth bullet on the template, *Identification of strength or area to work on in your practice*. She continued,

I feel like I can identify my strengths to work on. But what’s not so straightforward is the way [my instructor wants me to] integrate theoretical and empirical knowledge and the implications for areas that I need to work on. . . . And that’s the stuff they look for, and that isn’t given in the instructions for these assignments. . . . So, we need the guidance to

look at the meaning. Reviewing the template in class helps you hit what they are looking for.

Third, the template prompted student-teacher conversations about content expectations and evaluation criteria. Like the other participating students, Lea recognized the usefulness of the template but she didn't find the writing—or her instructor's expectations—so straightforward. Lea told me, “Some things [in the template] are clear, like *Describe a situation*. But some things are open to interpretation, and I need [my instructor] to let me know how she sees it. And I prefer to know this before I hand it in.”

Lea showed me an example of her first reflective journal for her current clinical course. As she explained her writing, she placed particular emphasis on the way her writing was evaluated. “See here,” she pointed to the second bullet, *Analysis of situation*. “I described how I felt and what I would do differently.” Then, she pointed to the marginal comments written by her instructor,

But they also want[ed] me to show differing points of view and use different sources of information. And [my instructor] gave me specific feedback to help me with the next journal . . . but that's not in the instructions or guidelines. That is why it is so important to ask [our instructor] to explain her interpretation and preferences for writing each section [of the template]. I'm writing it one way, but they want it written *this* way. I think this is the lens they use to evaluate writing.

The evaluation lens was an obvious point of contention with these first-year students. Although they perceived themselves as capable and confident enough to use the template for writing reflectively about their own clinical experiences, they needed particular kind(s) of guidance that connected clearly and reliably to evaluation criteria. First-year nursing students

also needed guidance from their instructors on how to write concisely, connect theory with nursing standards of practices, apply professional competencies to clinical experiences, and analyze personal-professional perspectives. These were difficult writing activities, and even more difficult to teach over a limited time span of one or two 6-week clinical courses.

Undergraduate curriculum and development specialists Ronald Barnett and Kelley Coate (2004) and Marcia Baxter-Magolda (2004) argue that it is difficult for adolescent undergraduates to internalize or integrate the personal with the professional—through the medium of academic writing assignments—in any given year across a 4-year baccalaureate curriculum, let alone in one course.

Lea went on to say that communicating her clinical experiences in writing was “so much harder than being able to simply talk about them.” She often wished she could just talk about her clinical experience “instead of writing it out on paper.” She eventually disclosed that the peculiarity of writing reflectively in nursing was her on-going challenge. One that, by the end of her first year, still left her puzzled.

They want us to learn to reflect in certain ways. I think that [writing the reflective journal] is a way to look back and have concrete evidence of what we did well and did not do well. But thinking about writing it the way they want us to write is hard. They’ll ask you to use the template. Then, they’ll ask you to apply the competencies, and then to analyze how they would apply to your situation. Then, they’ll ask you to integrate sources. It’s hard to make these connections. Sometimes, I still can’t figure it out.

Still Can’t Figure It Out

All four first-year nursing participants experienced challenges, frustration, and confusion while learning to write the reflective journal. The most common phrase used by participants to

describe their challenging experiences was that just used by Lea, “I still can’t figure it out.” Students simply could not figure out writing assignment expectations because they were so drastically different from previous writing experiences in secondary school. Participants said that they were essentially looking for patterns of instruction that they could follow—patterns that were predictable and reliable. For example, students often found templates and guidelines reliable, but only partially reliable because instructors’ evaluation (of reflective writing) was not always predictable. The evaluation process was difficult for students to understand because there were no concrete, predictable patterns of “good writing.” When there were no patterns to follow, or patterns were not immediately recognizable, then students described their writing experience as confusing, frustrating, or challenging. When asked what kinds of activity added to their confusion or frustration, participants named three things: defining the genre, interpreting unhelpful feedback, and differentiating writing activities.

Defining the genre. Students attributed some of their writing difficulties to an unclear or absent definition of the reflective journal. More than one-half of the participants could not define it. Lea and Brianna said they could not define it because they did not know what to call it. They could not follow the different labels or names given to the genre. Lea pointed out that the genre was called a *reflective journal* in the course outline (syllabus), *journal of reflective practice* in the appendix of the course outline, and *reflecting on my practice* in the template. Lea conceded, “I can’t follow when you keep calling it different things.” Albeit slight variations, the names varied just enough to cause confusion. For Brianna it was downright “mindboggling.” She explained,

Defining the reflective journal can be very mindboggling. It’s called a reflective journal in one place, a practice journal in another. I don’t know. Are these the same? I could not

tell you. . . . I think I would be able to better define it if there were better consistency between [assignment documents] and descriptions. . . . Maybe, I would be able to better define it if I had better feedback with my first few journals. I tried [to write it], but I received feedback that said, ‘this is vague.’ I am like, well, [your feedback is] vague. So, I just don’t think I can follow when I don’t know what to call it.

According to Ellis, Taylor, and Drury (2006), Brianna was not being overly dramatic when she described the definition of the reflective journal as *mindboggling*. Their study of first-year science students learning science at one Australian university responded similarly to my case study nursing students. Like 73% of the Australian science students (p. 18), Brianna interpreted her writing assignment—the reflective journal—as a writing tool or product rather than an approach or means to understand nursing and its written expressions (such as *reflecting on my practice*). The former implies that students tend to focus on superficial aspects of the writing experience, while the latter implies a deeper learning approach for nursing students.

The Australian study found that only 8% of study students experienced deep learning through writing assignments (p.19). Neurologist James Zull (2002) has suggested that students’ brains are actually hard wired for deeper learning, and that deep learning approaches require students to make meaning through emotive connections between past and present learning activities. Reflective writing, in particular, activates the *integrative cortex* (emotions), which integrates past and present learning activities so that students can make meaning out of their reflective writing experience (see pp. 164-168). The integrative cortex is where meaning making and deep learning connect. However, there may be more to achieving deep learning than just meaning making. My study suggests that first-year nursing students may also be attempting to make sense of that meaning in the context of their instructional and disciplinary discourse.

Educational specialist, Stephen Brookfield (2006), who spent almost a decade studying how educators respond to and understand the emotions of learning, states that learning to make sense of disciplinary discourse as a very emotional part of the student's autobiographical journey of learning (p. 75). Students will "use the jargon of [their discipline] to describe their learning journey [and] nearly always imbue it with emotional, even visceral, overtones" (pp. 75-76). Brookfield observed that the emotional side of learning, especially in cases of learning to reflect critically, created a pedagogical hypertension in the writing-to-learn classroom when instructional preference was given to the cognitive approach. I, too, noticed this in my own case study observations of the writing-to-learn nursing classroom. Participating nurse educators who explicitly taught students to write the reflective journal often viewed writing as a skill and tool for learning rather than a pedagogical space for learning nursing as an intellectual reframing of words and meaning of words in the confines of its community of practice.

From Zull's (2002) perspective, pedagogical tensions can arise when instructors who teach with writing stress language and grammar over meaning and comprehension. Language is essential for learning and demonstrating student learning, but "at its heart, language is also about images" (p. 169). He explains that if a teacher says the word *girl*, the student's mind produces an image. The teacher's image may be different than the student's image, but the category *girl* has common features and elements. If the teacher asks the student to draw his image of a *girl* and he draws a *tree*, then there is an obvious problem. Zull emphasizes that an important part of learning is the teacher's ability to produce an image that contains the same features as the student.

Teaching with writing to learn nursing is much like Zull's example of forming the right images when students hear words. In this case of first-year clinical course students learning reflective writing, the nurse educator and nursing student should see the same common features

and elements of the reflective journal when they hear the same word(s). If the words are *reflective journal*, and the nursing student thinks “a daily diary of what I did today” and the instructor thinks “theoretical application and critical reflection of community health nursing standards,” then we have a problem. I want to highlight a behaviour that masks this problem. I noticed from my classroom observations that the definitional differences between the student’s and instructor’s image of a reflective journal, while blatantly obvious here, are nearly impossible to detect in class, during discussion, or before the assignment is turned in. A student behavior that disguises this problem is that students think they understand the words used in the context of the nursing classroom. If they know the word (e.g., journal), they believe they understand the thing itself.¹⁰ So, they tend not to ask questions in class or to clarify meaning because they think they already know the meaning.

Jasmine thought she knew the meaning of the word *competencies* when she heard her instructor use the word in class. However, outside of the classroom, as she attempted to integrate competencies into her journal, she ran into problems. She described her experience with emotional undertones,

We’re told to integrate ‘competencies.’ As I was writing my journal, I was [thinking], ok, what are those exactly? Do you mean ‘nursing practice competencies?’ Do you mean ‘standards’? Are standards the same as competencies? . . . I went to my course outline [to find an explanation]. [It’s] hard to navigate a 15-page outline. So, I asked [a peer] and she said they mean ‘graduate competencies.’ What? Isn’t that different? Then, I managed to find [a document titled] ‘graduate competencies and year-end outcomes.’ [Jasmine shows

¹⁰ More than 50 years ago, Dewey and Bentley (1949) addressed the epistemological problem of *words, use of words, and meanings of words* in the classroom. They wrestled with the (lamentable) pedagogical outcomes that arose from the disciplinary use of words and student-teacher misunderstandings of the concepts that were embedded in words and meanings that represented historic traditions of the discipline.

me the document] . . . Oh, ok, this is what [my instructor] meant. I had to use this document and incorporate competencies from this document into my journal. Honestly, I couldn't navigate my way through writing this; the wording just isn't consistent across all these documents.

Of course, Jasmine did navigate her way through writing the journal and successfully completed the assignment, but she struggled along the way. She pointed to the inconsistencies between written descriptions and verbal instructions, which reasonably confounded Jasmine and added to her writing difficulties. However, her writing challenges were as much from inconsistent labeling as they were from her own novice understanding of words, use of words, and meaning of words in disciplinary discourse.

Alyssa had difficulty defining a specific kind of disciplinary discourse called evidence-based practice. Some of her writing challenges were directly linked to her misunderstanding of that discourse, but not all. She reported that the definition of evidence-informed practice eluded her *plus* there was “a whole bunch more” that contributed to her writing challenges, meaning she was acutely aware of how difficult it was for her to transpose her clinical experience into discursive text. Alyssa explained that when she started to compose sentences and paragraphs, multiple challenges seemed to collide all at once during that act of composition.

During our interview, Alyssa reminded me that she really appreciated the template prompts because they helped narrow her focus for writing. Prompts were useful to get her started and to stay focused. However, it was hard to write the content in context. Composing sentences that required evidentiary support for her clinical experiences—and at the same time met marking criteria and instructor expectations—complicated Alyssa's existing writing challenges and created a state of confusion. Alyssa admitted,

What exactly is evidence-based practice? Well, if I were to say anything, I would say it's incorporating references; I have to incorporate references when reflecting on my practice. It's really difficult to incorporate references. I'd say that's probably usually the hardest part [of writing the reflective journal]. It's also good, in one way, because I start researching things for my journal that have to do with something that I was interested in in the first place, but in another way it's confusing. Nursing is a very—what's the word they use—evidence-informed practice. So, here's the confusing part. I understand that [clinical] practice triggers the development of those skills, but is it necessary in first year to sort of incorporate sources or articles into reflecting on your practice? Honestly, just the differences that were expected by different [instructors] and the amount of feedback is something I had not experienced before. Writing like the teacher wants, revising to the feedback, and then do[ing] the evidence-based thing, too? Just look at the way I need to write in the faculty. It's dependent also on the tone [of my reflective journal] and the way I word things . . . and the way [my instructor] interprets 'evidence, statements, graphics, warranted conclusions' or how she 'thoughtfully evaluates alternative points of view' Can you see why it's confusing? For me, it's a lot of trying to guess and hope that I am smart enough to figure it out.

Interpreting unhelpful feedback. Students said that feedback was not helpful when instructors' comments were overly positive, too lengthy/too much, vague, or contradictory. Participants recalled, for instance, the over use of exclamation points, checkmarks, or emoticons, unexplained idiomatic phrases like *good job!* or *good journal!*, and lengthy or wordy comments. Three out of four students had a very difficult time interpreting comments that followed the sandwich approach (negative feedback sandwiched between two pieces of positive feedback).

Jasmine actually reported that she understood the rationale for the sandwich approach. However, she credited her understanding to being an older student in her third-year of university. She did not think students in their first year of university could follow it well. And she was right. First-year student Brianna struggled to make sense of the sandwich approach. Brianna recalled,

[My instructor] will always start out by saying at the top [of my journal] ‘good job’ but then there’s a bunch of feedback listed about all these things I did wrong . . . and then at the end of it, she says ‘good journal.’ That’s all it says, in red pen, ‘good journal’ and a couple of checkmarks. I’m like, what do you mean, *good journal*? Did you read it? So, I don’t know that any of those comments could have made me better at writing.

This approach had unfortunate learning consequences for Brianna who had difficulty following this linear sequence of good-bad-good commentary. She retained only the last comment, *good journal*, discarded any constructive feedback, and conflated feedback as *all these things I did wrong*. This was a clear case of communication breakdown between Brianna and her instructor, which directly affected Brianna’s ability to resolve any problematic areas in her nursing practice or with her writing skills.

According to Susan Scott (2004) who observed feedback and communication methods of successful corporations, the sandwich approach was the least effective method for building strong, clear communication in working relationships. She found the most common error was “putting so many pillows around a message that the message gets lost altogether” (p. 144). When givers of feedback cushion the receiver’s problem, the cushioning can make the issue less likely to be resolved quickly, openly, and transparently. Roger Schwarz (2013a; 2013b), who is an expert in the field of leadership, found the sandwich approach undermined effective communication in the workplace. He recommends moving away from the sandwich approach

and moving towards a transparency approach, or what he calls, a *mutual learning approach*. Schwarz encourages leaders to use the mutual learning approach to improve communication and build cooperative and collaborative learning environments. To use the mutual learning approach in educational classrooms, the teacher and student decide together on the feedback that works for the student.

The mutual learning approach is also highly correlated to building trust and respect between the teacher and student.¹¹ This is a correlation that Scott (2004) does not find with those who use the sandwich approach. Scott points out that the sandwich approach is based on *performance management*, which can create excellence in performance but not necessarily in learning leadership or decision-making skills, or what she claims is even more important, learning relationship skills. “Relationships,” Scott claimed, are learned “one conversation at a time” (pp. 5, 7). Effective leaders treat feedback as one conversation that leads to another. The most effective conversations that help build students’ relationship skills are direct, honest, genuine, and mutually transparent between students and teachers.

Finally, I will very briefly highlight three other examples of unhelpful feedback shared by Lea and Alyssa. Lea struggled with “too many comments” from her instructor. It was just too much to process in one sitting. During our interview, she showed me one journal entry to help illustrate what she meant by *too much*. As her fingers went down the margins of the pages, she said, “I read all these things I did wrong. . . . I understand that improving these things is what I need to do . . . but it is too confusing to give me all these things all at once.”

¹¹ There were similar findings in a recent experimental study of feedback and response with medical students in emergency medicine led by Tracey Hillier, Associated Dean of Curriculum in the Faculty of Medicine and Dentistry at the University of Alberta (personal communication, September 18, 2013, at the semi-annual MD Program Curriculum Retreat). Hillier found that medical educators who used the mutual learning approach with their students had high correlations of trust and respect. A finding that Hillier said she did not expect, but was so pleased to find because increased levels of trust between medical students and educators also boosted morale and teamwork, which ultimately transferred to the quality of care in emergency situations.

Alyssa found it downright annoying to receive short, vague comments or emoticons, like smiley faces, and symbols such as checkmarks because she could not interpret their meanings, even if the comments and emoticons were positive. In fact, she was so annoyed by those symbols, that she actually stopped putting any real energy into her reflective journals and just started writing “fluff.” She said,

It’s really annoying when I get my first comments back, and my tutor says, ‘good reflection,’ or writes in the margin ‘check your learning goals,’ or puts in a couple of check marks here and there. Like, I spend so much time on everything that I’m putting in, and then I get it back and all it says is *good!* and a couple of check marks? What do you mean by *good?* I don’t know what that means. . . . And if that’s all you’re going to put into [the feedback] then I’m just going to start fluffing it, because I’m wondering, what is this doing for my learning? If you’re not going to put anything into [the feedback] then I’m not going to either. When I do this assignment I want your feedback, not your smiley faces.

Alyssa also had strong feelings about collective feedback, meaning general feedback given to the whole class. She felt that the instructor’s collective (spoken) comments were often incongruent with the individual written feedback she received from her instructor. Alyssa recalled a time when another nursing instructor (from a different course) told the students collectively in class “you did a good job” on reflections. Then, Alyssa looked puzzled, “But in my journal, she told me all these things I did wrong . . . and I did not understand that.” When I asked what exactly she didn’t understand, Alyssa replied, “It’s hard to figure out. She’s talking to everybody, but is she talking *about me?* [student’s emphasis] It doesn’t make sense to me. Who is doing *good?* Not me. Very confusing.”

Differentiating writing activities. Students had a very difficult time reading writing prompts and understanding the writing tasks when they could not differentiate the meaning of key verbs in different writing prompts. Students were particularly frustrated that they could not differentiate between *analyzing* a situation and *describing* a situation. As Lea said,

When I look at the assignment prompts, to me, *description* of a situation and *analysis* of a situation can be answered in the same thing. Since I view them as the same, I find [that] I repeat myself, and I learn to say the same things in a different way. I don't quite see the point of having both.

The frustrating thing for Lea was that she noticed she was repeating herself, and did not know how to correct it. Her emotions snowballed. Frustration turned into confusion, and confusion into despair. She was even a bit flustered as she explained it to me,

I just don't understand how [describing and analyzing] are something different. I mean, is it explaining and stating outright what happened? I view that explaining a situation is the same as describing a situation, but then again is this something different? Aren't I just supposed to say how or what I thought about [my clinical experience]? I think [that] when I see [the prompt] *description a situation*, I would write what happened and how I felt about it, as opposed to the analysis of it. I don't know. I'm confused even now and cannot explain the difference[s]. . . . I think these all tie into one another but they are all the same. I don't know. . . . I was frustrated [and] I was just repeating myself over and over, and I don't know how to fix it. It's hopelessly confusing.

Lea was experiencing what I call a pedagogical entanglement. She was asked to learn a particular (writing) skill, such as analyzing a situation, and she was provided the right kinds of scaffolding, such as a template with writing prompts. Lea found the template prompts only

partially reliable because, even before she started writing the journal entry, she was already carrying uncertainties of her instructor's writing and marking expectations. Unpredictable expectations frustrated Lea, especially when Lea attempted to write descriptive, analytical, and theoretical components of the reflective journal but was unsure whether to write them in bulleted lists or extended paragraphs. Lea's cognitive acts of writing-to-learn professional skills also involved emotional-relational skills that were much harder to figure out and recognize. Lea was left linguistically limp in expressing her confidence, following her marker's directions, knowing what behaviours were expected, knowing when (and who) to ask for help, and how to ask the right questions or express her own needs. As Lea was attempting to write her journal, she was also attempting to manage her own emotions and resolve problems using a variety of emotional-relational skills to effectively handle the developmentally relevant tasks of describing and analyzing a situation. In a way, Lea was trying to recognize, reconcile, and manage the content of her reflective journal as much as the context in which she had to write it.

Brianna had a very similar experience when it came to differentiating linked assignments. She could not understand the relationship between writing her *learning goals* (a completely different assignment) and writing her *reflective journals*. I asked if she could try to explain the differences. Brianna replied,

Honestly, I have no idea. The learning goal was one assignment and the reflection was [another] assignment [yet] I could write about the same thing in both. I could do my first learning goal on transferring a patient and I could do my reflection on transferring a patient. In the learning goal, I'm supposed to reflect on it before I've achieved the learning goal and evaluate how it helps [my] future practice. Like, the learning goals and reflections are sort of in one. So I don't see them as different. . . . I have to identify

strengths, weaknesses, [and] what I need to work on. That's what a learning goal is.

That's what a reflection is. They're the same. They're connected, but they're different? I don't know. . . . Maybe if I didn't talk about the same things [in both genres], they'd be different. I don't know; because we have to reflect in my learning goal. It's confusing.

It was obviously difficult for Brianna to write about the topic of transferring a patient because she could not contextualize or integrate the topic into different genres. Lea felt like she was repeating herself throughout her journal writing because she could not differentiate describing a situation from analyzing a situation or the contextual relationship between the two.

Participating instructors reported that other first-year students experienced similar problems as Brianna and Lea in differentiating writing instructions, which should be no surprise. Differentiating writing activities is a common and well-documented problem throughout students' secondary and post-secondary education, and the problem spans across disciplines. Students have struggled for decades, with differentiating between key terms and critical concepts important to the disciplinary context.

Table 2 shows other disciplinary case studies that have reported student problems with differentiating writing and reading activities. I provided these to help demonstrate that it is a widespread problem (that has been documented for several decades now), and to remind ourselves, as educators, that students can face sophisticated writing problems in many subjects of their education, which may extend as far back as their primary school years. Chapman's (2006) review of research in elementary school children's written composition found that students experience differentiation problems as early as the third grade (see an overview and summary of research studies pp. 22, 26-27).

Table 2

Disciplines Reporting Student Difficulty with Differentiating Key Terms

Discipline	Reported that students could not differentiate between:	Author(s) and date of publication
Reading	Relevant and irrelevant information	Jackson (2002)
Chemistry	Facts and assumptions	Kogut (1996)
	Kinetics and thermodynamics	Sozbilir (2002)
Physics	Denoting speed and time	Gambell (1984)
	Algebraic letters and algebraic words	Cohen and Kanim (2004)
Music	Reading notes and hearing notes	Lawrence (1995) Henninger, Flowers and Council (2006)
Math (elementary)	Math variables and word problems	Cohen (1987)
Math (postsecondary)	Mathematical notations and models	Clement, Lochhead, & Monk (1981)
Social Studies	Socialism and communism	Sazanami (1988)
English Language Arts	Past tense and present tense	Hamzah (2010)
Library	Web-based, open-access (like Google) and private, fee-based search results (like WORLDCAT)	Whitehurst and Willis (2009)

In my case study, first-year nursing students like Lea and Brianna, for instance, reported difficulty with differentiating writing tasks and had trouble adapting what they already learned elsewhere to their reflective journals. Their differentiation problems may have possibly started in primary school, which may help to explain how and why emotions can run so high in college. Differentiation problems with undergraduate writing assignments may trigger compounded feelings of frustration and confusion and can implode an avalanche of self-deprecation, self-perceived incompetence, and inefficacy to write college-level genres (see also the Cohen & Kanim [2004] case study in Physics; Chapter 4 of the Snyder [1970] case study of MIT students who tended to blame themselves before they blamed the institution for their educative

difficulties; and Todd Riggs' [1992] course project in science and engineering ethics that confirmed Snyder's findings still held true at MIT 22 years later).

Year 1 Informal Interviews

After I conducted, transcribed, and analyzed participants' semi-structured interviews, I conducted an informal, voluntary focus group with eight first-year nursing students: Beth, Ian, Jai, Jill, Penny, Taylor, Tori, and Felicia. The focus group lasted about 30 minutes. The purpose was to discuss my preliminary findings from semi-structured interviews and get feedback on my understanding of what the other seven participants said about learning to write the reflective journal assignment. I called these informal interviews endorsement interviews. I met with this group of nursing students in a familiar common meeting area at the Edmonton Clinic and Health Academy (ECHA) building, the nursing faculty's home building where all the first-year students had their nursing courses. All focus group participants gave permission to audio record the session. Transcriptions of this focus group were coded using the same procedures as the semi-structured interview transcriptions.

Focus group participants agreed with the study participants and the findings that I presented in this chapter. As the focus group participants confirmed the two major categorical themes of "can't figure it out" and "still can't figure it out," they were invited to respond to questions about learning and writing the reflective journal. Students were asked to share the first thing that came to their minds and many replies were accompanied by lengthier stories about their reflective writing experiences. Below, I briefly state the question that I asked the group, followed by a few direct quotes that best represented the overall sentiments of the focus group participants.

Question: What is it about writing the reflective journal that was hard, challenging, or that you still can't figure out?

Beth: I can't seem to figure out how to manage my time to write everything I need to write in the time I have to write them.

Jill: There is just too much writing for five to six week courses!

Taylor: Nothing prepares you for this. We talk and talk and talk about it [in orientation, workshops, writing tutorials, Centre for Writers], and even high school college prep classes, but that's just dumping information all at one time. When you have to use it, it's different.

Felicia: I'm still trying to figure out clinical writing from tutorial writing. How do you write a reflection in a scholarly paper? And how do you cite scholarly sources in a reflective journal?

Ian: Writing and APA. I'm not going to nursing school to be a[n] APA-master. I'm not in school for that.

Question: What would help you figure it out?

Jai: Help us focus on growth and development at school.

Penny: Do not focus feedback on referencing.

Tori: We need to study more theory. Help us integrate theory into the content.

Ian: *More feedback* [student emphasis] doesn't help us. We have a lot to adjust to and eventually we'll integrate the sources and the theory [that our instructors] want us to. But overloading us with feedback won't help.

Year 1 Student Suggestions

Students from the focus group were provided an opportunity to share their suggestions to help facilitate their learning of the reflective journal and were asked: *If you were to make recommendations for improving how you learn to write the reflective journal, what would you suggest?* Responses focused primarily on the role that feedback plays during the writing process. Students emphasized relational factors such as thoughtfulness, timeliness, and frequency of talking about key terms and dominant conventions of the assignment. Students suggested:

- Peer feedback is helpful for catching mistakes and overlooking the criteria but we really want feedback from the classroom tutor who has the nursing experience;
- Take time to provide more thoughtful feedback throughout the entire journaling process and refrain from focusing on grammar and APA when marking the reflective journal;
- Thoughtful feedback means making us feel that you understand our perspective;
- Structure into the assignment enough room for lots of talking with peers and tutors about things we do not understand; and
- Define and repeat often the definition and meaning of *evidence-informed practice*.

Year 1 Closing Remarks

This chapter discussed what first-year nursing students and instructors said about learning and teaching the reflective journal assignment. They shared a very social, emotional, and relational side of learning to write this assignment and revealed an instructional tension in the learning process with inherent expectations and assumptions that were often provoked by this one writing assignment. Overall, students and instructors discussed a constellation of personal,

political, relational, emotional, disciplinary, curricular, and institutional dynamics of learning to write in first-year nursing education.

First-year participants used one common phrase with its variants: *teaching and learning to write the reflective journal is like learning a new culture*. Students recognized a distinct culture of writing in nursing in two ways. First, they explicitly recognized the particularity of writing in nursing. They noticed the nursing discipline and profession used terms, activities, and assignments in particular and unique ways as compared to, for example, their writing experiences in Psychology 100 or Sociology 101. Second, students emphatically recognized the amount of writing, feeling that they wrote too much and that they were expected to write in a peculiar and unfamiliar ways, such as referencing and citing sources in a reflection. Students described the writing culture in nursing as one with high expectations and diverse views of good writing that were hard for students to follow. Contrary to students' intentions, they often misunderstood the assignment, their instructor, or both, and described their learning experiences metaphorically as a lot of guesswork, feeling blind, a battlefield, hit-or-miss, and a sink-or-swim venture.

Students reported they were trying to figure out *stuff*. By *stuff*, they meant the particular aspects of an unfamiliar nursing education writing culture. Most important to students was trying to figure out how to communicate effectively with their instructors about expectations and assessment before the assignment was due, how to make connections with people who could help them learn and develop personally as a young adult, academically as a student, and professionally as a nurse-in-training.

By the end of Year 1, students revealed that they were still trying to figure out how to write the reflective journal and mentioned three things that were still giving them trouble. First,

they were uncertain about what a reflective journal is and were unable to define the genre, which students attributed to very nuanced but confusing label variations. Sometimes it was called a reflective journal, sometimes a journal of reflective practice, and at other times reflecting on my practice. Second, students were appreciative of the template worksheet with writing prompts to help write the format of the journal but students did not necessarily possess the reading skills to differentiate key terms in the writing prompts, often feeling confused over how to describe a nursing situation and how to analyze a nursing situation. Third, students could not figure out how to revise their writing based on written comments that were either too detailed or too vague, or even overly positive. While students expressed a need for some encouraging feedback, they also needed feedback that focused on how the student could improve his or her writing and content deficiencies. Students were looking for more specific and timely feedback that was also more consistent between tutors.

Overall, the explicit first-year writing challenges were two-fold. First, students encountered such a multiplicity of instructional expectations of writing (and aimed to please their instructors) that they could not intellectually frame the meaning, function, and use of reflection, reflecting, and journaling for themselves. Second, instructors viewed writing the reflective journal as a skill and tool for learning nursing rather than a pedagogical space for self-directed learning and culturally integrating themselves into a community of practice. A fundamental (and nagging) problem is teaching/learning to write in a community of practice with undefined discipline-specific language.

Year 1 Summary of Findings

This chapter presented responses from seven individual semi-structured interviews with four students and three instructors and included one voluntary informal endorsement focus group

with seven students, all of whom talked about their experiences of teaching and learning to write the reflective journal assignment in one first-year nursing clinical course. Student responses focused on what helped and hindered their reflective writing. The main findings were:

1. Strategically talking about the assignment with the classroom instructor, student peers, and family members helped students work through significant first-year challenges of writing the reflective journal. The biggest writing challenge for students was instructional subjectivity, where writing expectations, feedback, and marking criteria varied so widely between instructors that students just could not adapt.
 - a. Students found it extremely helpful to talk with classroom instructors because they were the readers and markers of the assignments. Students talked most often with the classroom instructors to clarify writing instructions and marking expectations. Students recognized that the quality of their questions impacted their own learning to write. Poor questions would beget poor discussion. The pedagogical detriment to learning to write the reflective journal through classroom discussion was that any discussion about the assignment was a strategic move on the student's part to satisfy the instructor and receive the grade the student wanted;
 - b. Students found it helpful to talk with peers in two ways. First, peers relied on one another to level their individual understanding of the marking criteria and instructor expectations. Peers started to build trusted student networks to help each other out with assignments. Second, peers collaborated on creating and revising their drafts before turning it in. On-going peer interaction provided students with an accountability partner who knew how to write according to the marking criteria and discipline-specific standards; and

- c. One student found it helpful to talk with a family member who was a registered nurse. There were two benefits to learning to write the reflective journal. First, the student could pre-write by talking through complicated nursing situations with another professional nurse and safely unload very personal emotions and opinions that came on after clinical rotations and witnessing acute/chronic illnesses, death, and trauma for the first time. This talking process provided her the opportunity to think through and prioritize what to include/exclude in her reflective journal content. Second, the student was motivated to write about an otherwise un motivating situation. Often, when nursing situations were complicated and students' emotions were drained, students were just too overwhelmed to write about it. Talking about the experience and listening to a professional nurse's advice helped the student explore ways to verbalize an overwhelming experience and translate it into words and reflective text.
2. Giving/Receiving on-going feedback helped students write well when the feedback was specific, timely, and good. For the reflective journal, students preferred receiving a combination of all three and in the following ways:
 - a. Specific feedback meant that the instructor provided a limited number of specific examples that were also thoughtfully explained to the student. Focusing verbal (i.e., written and oral) comments on one or two competency specifics was all the students could handle. Specific samples of other reflective journals were also helpful for first-year students to view but only when the instructor pointed out, guided, and explained certain features, structures, and elements within each sample. The benefit to learning to write the reflective journal was that guiding explanations and specific explanations

brought out instructor's writing and marking expectations, which eased students' uncertainties about writing and marking;

- b. Timely feedback meant the instructor responded to students' journal entries before the next journal was due. Receiving verbal feedback within 12 to 24 hours was quite effective at reducing students' anxieties about grades and quality of writing. Having written feedback orally explained to students one-to-one motivated students to revise their writing. Student were even more motivated when given the opportunity to revise and hand it in again for a revised mark/grade; and
- c. Good feedback is characterized by a direct and empathetic response from the instructor. Typical feedback provided remarks on nursing competencies or some element of marking criteria. However, good feedback more directly validated and acknowledged what the student was attempting to communicate.

Validating/acknowledging the writer was central to the students' emotional-relational learning needs, such as managing emotions, establishing a trusting student-instructor relationship, and developing psychosocial attitudes and values of nursing practice.

Instructors revealed that direct and empathetic feedback was beneficial to reflective journal writing but time consuming and difficult to sustain in a curriculum with intensive writing requirements, short courses, and growing enrollments.

3. Assignment supports, such as a writing template worksheet, helped students' in a limited way.
 - a. Parts of the template were straightforward. The structure, format, and guided prompts for content provided assistance for getting started immediately. This also provided a starting point from which to ask questions in class and clarify content expectations and evaluation criteria; and

- b. Parts of the template were not so straightforward. The writing prompts challenged students' thinking, writing, and reading abilities. Some students had difficulty reading the prompt, not quite understanding what it meant to *describe a situation*. Other students had difficulty with summarizing a situation clearly and concisely, and still others had difficulty with identifying and prioritizing nursing competencies.
4. Undefined or inconsistently labeled genres hindered students' understanding of what constitutes the reflective journal. Students felt they should be able to define or at least describe the genre in order to incorporate broader/deeper disciplinary discourse into their reflective writing. However, defining the reflective journal was problematic for students. In part, because different labels, such as *reflecting on my practice* and *journal of reflective practice*, were applied to the reflective journal assignment and varied just enough to cause confusion for a first-year nursing student who wondered if they were written similarly/differently. The detriment to learning to write the reflective journal was a loss of (or novice understanding of) the meaning and use of key words and concepts in both theory and practice, and worse, students believed there was a right way to write a genre according to its label.
5. Feedback was not helpful to students' revision process when the feedback was overly positive, too lengthy/too detailed, vague, or contradictory. Students did not like the sandwich approach (good-bad-good); they tended to remember the bad and nothing else. Instead, students preferred more transparency, honesty, and directness about good/bad writing. The former encouraged performance-based writing, focusing on goals, outcomes, and academic achievement; the latter elicited collaborative-based writing, focusing on trust, respect, relationships, leadership, and decision-making.

6. Students expressed difficulty with two particular writing tasks and activities:
 - a. Students did not differentiate *describing a situation* from *analyzing a situation*. They thought the verbs, describe and analyze, were too synonymous in context to distinguish the differences, and therefore, claimed to repeat themselves over and over throughout the entire reflective journal. Repeating oneself in the reflective journal was a frustrating writing experience. Frustration turned into confusion and confusion into despair. This was detrimental in that students felt they would never learn how to write a reflective journal appropriately; and
 - b. Students did not differentiate the *learning goals assignment* from the *reflective writing assignment*. These were two completely different assignments with their own set of marking and evaluation criteria. However, students did not see them as separate because they both shared similar thinking/writing tasks. Learning goals required a reflective component, journals required students to integrate learning goals, and both asked students to identify strengths and weaknesses. What they wrote in one assignment, they duplicated in the other. Duplicating text between assignments was not what students imagined for themselves when they entered the program. They were frustrated and confused and tended to self-blame, meaning students blamed themselves for their writing shortcomings rather than seeing writing shortcomings as a shared responsibility between them and the nursing faculty.
7. The informal endorsement focus group revealed that students were still trying to figure out how to manage writing demands in the upcoming year and still baffled by how to cite scholarly sources in a reflective journal.

Chapter 4

“It’s a Hard Adjustment”: Learning to Write the Scholarly Paper in Year 2

Year 2 Assignment Description

The second-year writing assignment was titled *Scholarly Paper*. Figure 4 shows the assignment details from the course outline, which describes the assignment name, mark value, and due date. About mid-page, there are a couple of sentences that note the assignment details and topic will be forthcoming and posted on “eClass under the Assignment icon” (eClass, also called the course Moodle, the university’s electronic document and course management system). Figures 5 through 8 show assignment details (4 pages), which were posted on eClass sometime during the first week of the course. Page seven of the course outline referred to a scholarly paper marking guide (Appendix N), which was posted on the student eClass, and page four of the assignment details stated that students should “review the ‘General Guidelines for Evaluation of Scholarly Papers’ found in the course outline” (Appendix O). All assignment descriptions and marking guides in this chapter are used by permission of the case study Faculty.

Figure 4

Year 2 Scholarly Paper Assignment Description from Course Outline

7	
COURSE EVALUATION	
In order to pass Nursing [REDACTED], students must complete the required CBL tutorial and lab experience and the following requirements:	
<ol style="list-style-type: none"> 1. Scholarly Paper 6W1 Due: January 30, 2012 6W2 Due: March 26, 2012 2. Tutorial Self-Evaluation 6W1: Week of February 13, 2012 6W2: Week of April 9, 2012 3. Combined Tutorial and Lab Exam 6W1 Date: March 1, 2012 6W2 Date: April 20, 2012 5. *Lab Skills (LAG) 	<p>30%</p> <p>20%</p> <p>40%</p> <p>10%</p> <hr/> <p>100%</p>
[REDACTED] ASSIGNMENTS	
<ol style="list-style-type: none"> 1. SCHOLARLY PAPER Each student will write a scholarly paper. Details related to the scholarly paper topic will be posted on the eClass under the Assignment icon, along with a marking guide. 2. TUTORIAL EVALUATION This is a mark that is earned during tutorial time. Tutors will be looking at your performance as a whole as we recognize that each student offers different strengths and works to reach unique goals. Examples of the criteria tutors will be assessing include (but are not limited to): <ul style="list-style-type: none"> ✓ class participation ✓ learning goals ✓ handouts of selected topics prepared for tutorial ✓ critical thinking questions for your own topic and during discussions ✓ participation on tutorial leadership teams ✓ professionalism ✓ ability to evaluate yourself and your peers (self-evaluation and feedback) ✓ preparedness for each tutorial <p>On a date set by the section tutor, students submit a learning goal from <i>each</i> of the performance expectations from the [REDACTED] Tutorial Assessment Guide categories: Self directed learning, Group process and Critical thinking. Submit goals <i>and</i> strategies to meet these goals in writing to the tutor and one colleague who will peer-evaluate your performance. You will provide written and/or verbal feedback to a peer as per tutor instruction.</p>	<p>30%</p> <p>20%</p>

Figure 5

Year 2 Scholarly Paper Assignment Details (page 1 of 4)

<div data-bbox="326 359 475 520" style="border: 1px solid black; width: 92px; height: 77px; margin-bottom: 20px;"></div> <div data-bbox="602 464 1036 548" style="text-align: center;"><p>Nursing XXXXXXXXXX</p><p>Written Scholarly Paper Assignment</p></div> <div data-bbox="337 575 438 598"><p>Overview:</p></div> <div data-bbox="337 625 1229 682"><p>This is a scholarly paper. You are required to explore peer reviewed published nursing and health discipline –related research in the development of this assignment.</p></div> <div data-bbox="337 709 1299 1052"><p>Self-management in chronic conditions can be complex. Many chronic conditions require a variety of therapeutic medication regimens as well as sustained life style changes. The health care team can provide support, expert assessment and opinion but it is ultimately up to the individual client to implement the health related recommendations. In traditional biomedical models, <i>compliance to medical advice</i> was the term used to describe the process of experts determining the best treatment plan which patients were then expected to follow. In the discipline of nursing, <i>compliance</i> is not regarded as congruent with nursing values, assumptions, concepts and ways of working with clients to achieve the best health and wellness outcomes. Instead, concepts such as <i>Adherence</i> and <i>Concordance</i> are used to represent the partnership and working relationship between client and nurse. The overall purpose of this assignment is to foster the student’s ability to understand and apply the critical elements of partnership with clients in chronic care.</p></div> <div data-bbox="337 1079 423 1102"><p>Purpose:</p></div> <div data-bbox="375 1131 1297 1352"><ul style="list-style-type: none">• To examine the impact of a chronic illness on the individual• To demonstrate an understanding of the similarities and differences between the concepts of compliance, adherence and concordance in promoting self-management in chronic illness.• To demonstrate ability to apply principles, assumptions and values of adherence or concordance to facilitate client management of chosen disease condition and the nursing interventions• To develop scholarly writing skills• To demonstrate ability in critically analyzing and applying research based publications</div> <div data-bbox="337 1379 496 1402"><p>The Assignment:</p></div> <div data-bbox="375 1432 1282 1709"><ol style="list-style-type: none">1. Select one of the health conditions listed below:<ul style="list-style-type: none">- Cancer- Multiple Sclerosis 2. Conduct a literature search and identify :<ul style="list-style-type: none">- At least TWO relevant nursing research articles that speak to the client’s experience of the disease condition and lifestyle modifications recommended to manage condition and promote health and wellness and that report research results related to determining how self management can be promoted by nursing interventions.</div>

Figure 6

Year 2 Scholarly Paper Assignment Details (page 2 of 4)

	<p>Nursing XXXXXXXXXX</p>
	<p>- At least FOUR published articles related to the concepts or models of compliance and either adherence or concordance. <i>These may be research, clinical or theoretical articles from the health disciplines literature</i></p> <p>A total of six articles should be resourced.....textbooks and other resources may also be referenced</p> <p>(A scenario telling a story about a client experiencing the phenomenon you are talking about is ONE way to help you get down to the specifics of WHAT you would do and HOW you would do it. E.g., Ann is a 49 year woman who was diagnosed with Multiple Sclerosis 15 years ago..... You DO NOT have to use a scenario if you do not want to.)</p> <ol style="list-style-type: none"> 3. Describe the disease condition, its prevalence in Canadian society and a general overview of the impact the disease has on the individual. 4. Identify and describe the main areas that people living with the condition have the most difficulty with; e.g., taking the medications/dealing with side effects, eating habit changes/restrictions, pain, etc 5. Compare and contrast the model of treatment compliance and EITHER treatment adherence or concordance. Describe how these approaches are similar or different in terms of their essential elements such as assumptions about the role and status of client/health care provider, the way plans of care are negotiated and determined and the responsibility for resulting behavior. Make, and explain/support your decision of which model is the better fit for nursing practice. 6. Describe how you would use specific elements/principles/ideas from your chosen model (either the adherence or concordance model) to assist the client in making self management decisions and provide practical examples that illustrate your approach. <p>Assignment Development Process:</p> <ol style="list-style-type: none"> 1. Develop an abstract outlining the key concepts that will be found in the paper to follow. (Your thesis statement does not belong in the abstract)

Figure 7

Year 2 Scholarly Paper Assignment Details Posted (page 3 of 4)

	<p>Nursing [REDACTED]</p>
	<p>2. Introduce your topic: Tell the reader what to expect in your paper: essentially, what is the condition, why is it important, what are the main issues to consider when living with it, what kinds of lifestyle modification are recommended. Indicate which area is most difficult to change and to stay committed to that change and why. Introduce your notion of the role nursing has in helping people live with chronic conditions and why the way nurses work with people can influence the success of their self management activities.</p>
	<p>3. Develop the body of the paper to include :</p> <ol style="list-style-type: none"> a. Description of the disease, its prevalence in Canadian society and a general overview of the impact the disease has on the individual. Identify and describe which aspect of self management is most difficult to follow for clients. Make sure you tell the reader why this self management activity is important for the clients quality of life/outcomes b. Introduce and describe the compliance model : what is it? Where did it come from? What is it applied to? What are the critical elements or concepts or ideas in it? c. Introduce and compare <i>either</i> the adherence <i>or</i> concordance model and identify how it differs from the compliance model d. Which model is a better fit to guide nursing practice in your context? WHY? e. Identify some ways you, as a nurse, can use specific strategies, based on principles from your model to work with your client to help manage their chronic condition.
	<p>7. Develop a conclusion. What are the main ideas you have presented in your paper and what have you learned. <i>What are the take home messages you want to leave with your reader?</i></p>
	<p>8. Seek feedback on your first draft of the assignment (e.g. peers, writing resource center, etc.)</p>
	<p>9. Finalize your assignment and make sure to edit it as per APA guidelines before you submit it</p>
	<p>Format & Submission Details:</p> <ul style="list-style-type: none"> • Write a 7-9 page typed paper (12 font Times New Roman, double spaced) excluding title page, abstract and reference list. Remember, the appendix does not count in your page limit.
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Figure 8

Year 2 Scholarly Paper Assignment Details (page 4 of 4)

Nursing ████████████████████

- APA format (6th Edition) is required focusing on the following:
 1. Correct development of title page
 2. Running Head and page numbering throughout paper
 3. Correct formatting of abstract
 4. Appropriately citing sources – both for paraphrasing and/or direct quotes
 5. Correct development of the reference page
- Please review the **“General Guidelines for Evaluation of Scholarly Papers”** found in the course outline when developing your paper.
- Submit your paper as per your tutor’s instructions.....written hard copy or an electronic copy
- A 10% mark reduction per calendar day will be applied to all late assignments (unless prior consent has been given by the tutor). A copy of final paper will be retained as an electronic file for the entire Term.

Note: Helpful resources to consider when developing your paper:

- <http://guides.library.ualberta.ca/content.php?pid=62779&sid=462252> (Library resource site)
- Writing Resource Center.
- APA Manual (6th Edition)
- E-class → Undergraduate Student Resource site → Writing Tools →
APA Referencing Tips (6th Edition)

The written instructions shown in Figures 5 through 8 communicated the following scholarly paper assignment details: overview, purpose, topic choices, literature sources, writing tasks, structure, format, length, style, late penalties, and suggested resources for writing support. Although not explicitly stated, the students had six weeks to complete the assignment from the first day of class, the marker was the student's classroom instructor, and the students were given opportunity to receive in-process feedback from the instructor.

The written instructions were prescriptive in nature and 100% of participants said that they were "too detailed" and student participants claimed the instruction were so detailed they could not understand the purpose or topic. The participating instructor clarified that the actual purpose of the assignment was two-fold: to explore three nursing interventions and explain how nurses can use one of those interventions to help patients manage a chronic illness. Although there were too many direct writing tasks and prompts to list here, the participants commented mostly on those tasks listed under the *Assignment Development Process*. Here are at least 13 of the writing tasks/prompts found in just this one section:

- *Develop an abstract outlining the key concepts that will be found in the paper;*
- *Introduce your topic . . . tell the reader what to expect;*
- *Indicate which area is most difficult to change . . . and why;*
- *Introduce your notion of the role nursing has in helping people live with chronic conditions;*
- *Develop the body of the paper to include [d]escription of the disease [and] it's prevalence in Canadian society;*
- *Identify and describe which aspect of self management is most difficult to follow for patients;*

- *[T]ell the reader why this self management activity is important;*
- *Introduce and describe the compliance model;*
- *Introduce and compare **either** the adherence **or** compliance model and identify how it differs from the compliance model;*
- *Identify some ways you, as a nurse, can use specific strategies, based on principles from your model to work with your client to help manage their chronic condition;*
- *Develop a conclusion . . . what are the main ideas . . . what have you learned . . . what are the take home messages?;*
- *Seek feedback on your first draft; and*
- *Finalize your assignment . . . as per APA 6th guidelines before you submit it.*

Year 2 Participants

There were five (5) second-year participants who responded to the call for volunteers. The four (4) students were Amy, Brea, Katie, and Tonya, and the one (1) instructor was Karen. For the purposes of this case study, which was exploratory in nature, my doctoral advisory committee and I agreed not to collect personal or demographic information such as age, ethnicity, GPA, academic standing, teaching tenure, or the like, so that I could focus on exploring interactional aspects that enabled/constrained how students learned to write this assignment. Therefore, no descriptive information about participants is provided in this thesis. Therefore, no descriptive information about participants is provided in this thesis.

The students and instructor were not asked why they participated in the study but all of them expressed a desire to provide the Faculty of Nursing with a better understanding of the way students learn scholarly writing in second-year nursing. Participants openly affirmed the need for the kind of writing assignment research that qualitatively explores the learning of assignments in

each year level of a baccalaureate nursing program. They hoped that the Faculty of Nursing would proactively respond to their perspectives and second-year experiences of teaching and learning to write the scholarly paper. Students, in particular, appreciated being invited to express their points of view and to share them through genuine and authentic conversation. They were grateful for the chance to reflect on their respective writing experiences because, from the reflection, they recognized a number of things about writing in nursing, and to their surprise, about their own growth and development (which I discuss later in the findings section).

Year 2 Data Analysis

The Year 2 student and instructor interviews began by asking: *What was your experience of writing [teaching] the scholarly paper in [name of course]?* As the interviews progressed with second-year nursing students, they talked about writing this scholarly paper in terms of their first-year writing and learning experiences, often emphasizing that they *figured things out* and started to recognize a connection to their development. Therefore, the researcher added the following question during the student interviews: *What are you realizing about writing in nursing?* These were the two questions that guided the year 2 data analysis stage and helped identify categorical themes of teaching/learning to write the scholarly paper.

Interviews with all five participants were transcribed by a professional transcription service, Verbalink, and each transcript was reviewed twice by the researcher. Before coding began, the transcripts were emailed to participants for review and approval. One student participant corrected a couple of sentences in her transcript that she thought were not accurately transcribed because she did not recall saying those words. The researcher listened to the original transcription of that student's interview again and found that the transcriptionist made an error, just as the student said. The researcher promptly corrected the error, inserted the correct words,

and saved a revised transcript. The revised transcript was emailed to and approved by this student participant. Subsequently, the researcher emailed all participants to ask them to read their transcripts carefully for accuracy. Another student participant replied that her transcript was accurate but that she wanted to add a more detailed explanation of one of her responses. The research fully incorporated that explanation verbatim into a revised transcript. The revised transcript was emailed to and approved by this student participant. Both revised transcripts were aggregated into the data prior to the coding stage.

After approval was received from all five participants, I followed the same procedures for data analysis as those described in Chapter 3. Likewise, Year 2 findings were triangulated through informant-validation and formal consultations with an interdisciplinary committee of specialists from nursing, education, and writing studies, and discussed with my doctoral co-supervisors to ensure that both the data collection and interpretation were appropriate and within the study's proposed objectives. Finally, all five second-year participants were asked to review a brief summary of findings and invited to add further comments, thoughts, and/or ideas. There were no additional comments.

Year 2 Findings

The second-year nursing student and instructor responses led to the emergence of two major categorical themes: challenges and connections. Challenges had four sub-themes: assignment instructions and purpose, assignment supports, student assumptions, and personal disappointments. Connections had one sub-theme: professional development. Students used two metaphors to describe professional development: learning to swim and doing it on my own. The following sections will focus on the students' voices and interject the instructor's voice where applicable.

Student Challenges

Assignment instructions and purpose. All four students said that the assignment instructions differed from previous scholarly paper assignment instructions in that they were “very detailed.” Students also said that they noticed the faculty’s good intentions of deliberately scaffolding the assignment with such detailed instructions and were very appreciative of these efforts. However, students said the instructions were “too detailed” and “difficult to follow,” which led to feel confused, overwhelmed, and “out of sync” with routines learned in Year 1.

Katie felt confused about the overall purpose. Katie said that she had a hard time understanding the bulleted list under *Purpose*. She interpreted the list more as learning outcomes rather than purpose, and she was confused when she compared the bulleted list under *Purpose* with the last sentence of the *Overview*, which explicitly stated that “[t]he overall purpose of this assignment is to foster the student’s ability to understand and apply the critical elements of partnership with clients in chronic care.” Katie said, “What’s the difference? The purpose is stated in the overview, but then there’s a section called *Purpose* with a list of what appears to be learning outcomes. That’s just too many details to follow, and it confused me.”

Brea mentioned that the length alone overwhelmed her and no matter how many attempts she made to “get through” the details. She felt that the instructions were just too difficult to follow. Brea recalled how difficult it was to get started,

Well, I remember first looking at the outline and the assignment [details] thinking, wow, it’s four pages? In the past they had only been about a page long. So, at first it was kind of overwhelming. Then, I went through it page by page [and] I got even more overwhelmed. I had trouble picking out what they wanted from us. It took a few times reading over it for me to get an idea of exactly what was being asked of me.

Amy didn't really know what was being asked of her either. Amy said that reading "so many details" really threw her off and she felt out of sync with her normal rhythm of writing the scholarly paper. She explained that over the last two years, she developed a reliable routine, thanks in part, to well-scaffolded assignment instructions. However, this time, the instructions were so detailed that she had a hard time getting started with writing the paper in her usual way. She said, "There were too many things I didn't understand . . . and it threw off my whole rhythm of writing." When asked what she did not understand, Amy mentioned two things,

First of all, I didn't understand what general direction to go in. I'm not used to seeing that much detail in the outline. I'm used to a few details, like what to include in your body. It's nice when they help us get started and give us a general direction to go in. But stating every single thing you need to include down to the fine detail, like the prevalence and description of the disease? I found this too detailed and it really threw me off. . . . The other thing was that some of us didn't understand what was a requirement and what was a suggestion. Were we supposed to include absolutely everything in seven to nine pages? If so, then, that's just too many things.

That is where Tonya got hung up, too. She said there were "too many tasks." She commented specifically on the amount of detail "piled into" just the first bullet point under number 2 on page one of the assignment details. That bullet stated,

Conduct a literature search and identify **at least TWO** [emphasis original] relevant nursing research articles that speak to the client's experience of the disease condition and lifestyle modifications recommended to manage condition and promote health and wellness and that report research results related to determining how self management can be promoted by nursing interventions.

Tonya pointed out that in addition to this sequence of requirements, there were three more pages chunk full of tasks and requirements. With an ere of frustration, she explained,

What really bothered me were the restrictions on the articles that we had to find. First, we had to find two articles. Ok, fine. They had to be primary research articles. Ok, fine. And [published] in the last ten years. Again, fine. But, what bothered me is that *both* articles had to speak to client's condition *and* lifestyle modifications *and* promote health *and* report research results *and* determine how self-management can be promoted by nursing interventions. This is too overwhelming. I mean how many studies can be done in the past ten years that have those exact parameters? I found that very frustrating. It was even more frustrating that, in addition to finding the perfect article, [she turns the page of the instructions and reads #3 through #6] we had to describe its prevalence in Canadian society, identify difficulties, compare and contrast models of treatment and describe, what does it say, *describe specific elements/principles/ideas from your chosen model*. I just don't think that that's possible.

For Tonya, this was daunting. It seemed impossible to fulfill every writing and research task stated across four pages of instructions.

This avalanche of prompts numbed students' ability to engage with the material and get started with writing. Katie said that she was "kind of frozen" after reading through the details and Brea said that she "couldn't move" after reading the instructions because she "couldn't tell what they wanted." Katie used this metaphor to describe her sentiments, which may have summed it up best, she said, "It's hard to start swimming when you don't have water or know what liquids you're going to be swimming through. . . . At least give us a ground so that we can step on something to start with."

Assignment supports. The instructor, Karen, agreed that the instructions “provided a little too much information.” Karen said that although the “assignment was conceptually clear to me, [it] was not [clear] to students.” She recognized that some students in her class were struggling with the instructions and getting started. She thought of herself as an instructor who tried to give students some ground to stand on. She liked to provide students with two kinds of assignment supports.

First, she held regular “housekeeping sessions” at the beginning of her classes so that students could freely ask questions about the assignment. This gauged the needs of students. One of the outcomes of listening to students’ questions for this particular scholarly paper assignment was that students “obviously did not understand the scope of the assignment.” Karen used the remainder of those housekeeping sessions to help students break down the assignment into manageable parts. Second, Karen decided to offer peer-group writing tutorials for this assignment. Previously, Karen had positive experiences with bringing a trained writing tutor from the university’s WAC program into her classes. She invited a WAC tutor to come to her class for one 30-minute session to help her students get started with writing this scholarly paper. I observed this tutorial session, as well as two additional voluntary, out-of-class writing sessions for any student who wanted additional help to complete their scholarly papers.¹²

Karen said that, in her experience, the group-writing tutorials were “nothing but positive for students” and “reduced their anxiety a lot.” Likewise, the writing tutorials also appeared to have a positive influence on Karen’s teaching. She felt that the in- and out-of-class writing

¹² For the sessions that I observed, the writing tutor helped students in needs-based areas, such as reading the instructions (i.e., breaking down those ominous details into manageable tasks), organizing each section of the paper, integrating required sources, composing an introduction, and explicating stated/unstated writing expectations and marking criteria. In total, 5 students voluntarily attended the two group writing tutorial sessions. One student came to the first session and four students to the second session. Brea, one of the participating students in this case study, attended the second session.

tutorials were also a supplement to her teaching. As a nurse educator, she had no previous pedagogical training or professional development support to aid her teaching of writing assignments (even in a nursing program that was as writing enriched as this one). She liked partnering with a writing specialist, especially one who was more knowledgeable in an area of teaching that she was not trained for. Karen stated,

For me, it was very helpful to know that those who have expertise in the area of writing can help me out. That is not an area of expertise for me. I know the nursing content, but the writing bit, I am not an expert in that.”

Another thing that Karen appreciated was that the writing specialist came to her classroom and coached the students through the writing assignment prompts, tasks, and requirements. She stated, “[The writing tutor] really explains the assignment and expectations well. I don’t know if it is the clarity of the instruction, or just the fact that we are offering the support to the students. But, the students respond favorably to those in-class writing sessions.”

Brea was one of Karen’s students who responded favorably to the group-writing tutorials. Brea said that although Karen was a good, helpful instructor and liked Karen’s housekeeping sessions, Brea needed more on-going, on-demand writing support than the housekeeping sessions could provide. She pointed out,

[Karen] was very helpful with specific needs. If we had any questions, we asked her, and she discussed them in class. [Karen] knew what she wanted, and she kept a solid message across [every discussion], so we were clear on what to write. And for me, honestly, I needed more support on how to go about that. . . . Even with the in-class [writing tutorial] session, I need more. I guess, until I am ready to write, I won’t remember tips or strategies shared in class. I need more support because all that information and discussion

in class, you kind of forget what the teacher is telling you. When I am ready to write, that's when I need support to help me stay on task. That's why I use our writing tutorials.

Limits of writing supports. Brea reported that her classroom instructor helped students with *what to write* and the WAC writing tutor helped her with *how to write* the scholarly paper. However, Brea claimed that group writing tutorials can “only go so far.” They cannot help with the “expected-but-unstated” expectations of how to write a scholarly paper. She gave an example of composing a thesis for her introduction. The WAC writing tutor usually suggested a way that she could organize the content and showed her effective ways to integrate the dreaded thesis statement in her opening paragraph. She explained,

By the second year, we have learned that they expect us to write in the what-so-what-now-what format. In the introduction, they expect certain things to be there, but they don't tell you. The writing tutor might break it down for you, but he doesn't really know because he's not from nursing [and] you don't really remember the tips to writing an intro, or organizing the paragraphs for your topic. So, having [the writing tutor] show us how to write that when we needed it was helpful and I took a lot of notes during his session on writing the introduction and where to include my thesis sentence and I wrote things down word for word, but when it came time to write it on my own later, I just couldn't do it.

There were three reasons why Brea just could not write it. First, she said that in the back of her mind she was trying to write exactly what she believes her instructor wants even though she does not know what her instructor wants or expects. Brea obviously struggled with her own perceptions of stated and unstated writing expectations. Second, even when the writing tutor explicitly explained how to write the introduction, Brea could not remember, recall, or transfer

the explanations at the moment of composition.¹³ Third, Brea had personal writing challenges that she had carried since high school. High school teachers were more forgiving of her writing deficiencies, but now that she was in university, it was getting a lot harder to hide them. She said, “in nursing they point out the little things that you kind of overlook in your paper and these are little, tiny things, that in high school weren’t important, but they’re really important here.”

Katie and Amy (not Karen’s students) also attended group-writing tutorials with classmates from their own class section and both experienced benefits from attending group-writing tutorials. However, they, too, recognized that writing supports from individuals outside their discipline had limits, especially around explicit and implicit disciplinary writing expectations. They each shared specific, personal observations that echoed a broader perception that nursing students have about university-sponsored writing and assignment supports.

Katie was highly self-aware of her writing challenges, noting that some started when she entered college and others she had been carrying for years since high school. Katie explained that she “always found it difficult to write an introduction,” and preferred learning how to write from her classroom teacher, which “was easy to do in high school.” However, things were different in nursing. Katie ascertained, “It is a bit more difficult to get writing help from our [nursing] tutors in university because they really don’t have the time.” Although Katie found that “some tutors will make the time even though they’re really busy,” she did not routinely get the guidance she needed to write her scholarly paper.

¹³ This finding was not a focus of this study, however, it supports findings from two (very informative) earlier publications: (a) scholarly review of writing response by Beach and Friedman (2006); and (b) an empirical study of peer response groups by DiPardo and Freedman (1988). Each, in their respective areas of expertise, found that students will forget what was discussed in writing support sessions because such supports are one-off, live events, where students cannot actually take away a transcript of what was actually discussed. Ideas and goals can be lost when students return to actually do the revisions several hours or days after the meeting (See also such claims by Moore & Filling, 2012, p. 4; Moore & MacArthur, 2008, p. 20, who have argued for video feedback for student writing.)

With a bit of resignation in her voice, Katie recalled her instructor's response after asking for some guidance on how to write the introduction for this scholarly paper, "[My tutor] just said, 'write it how you write all your introductions; introduce your paper to your reader.' And that was really kind of all she said to me and the other students." Katie conceded to going to the university's Centre for Writers, but could not get an appointment due to scheduling constraints. She said, "We are told that we have these writing supports on campus, but the sessions never seem to fit my availability. That's one of the limits, in that you can't schedule a time that works for you." When asked what she did when she could not get an appointment, she said, "I relied on my friends, and got through it OK."

Amy decided to attend the group writing tutorials scheduled for her class (cf., not a part of this study), hoping that they would boost her confidence. They did. She said, "I was feeling more secure and I knew that I could do this. I attended the writing tutorials to make sure I understood what was required and what was suggested." She said the WAC writing tutor "coached us through" each page of the instructions. He was trained to pick apart writing assignments and point out key things to pay attention to when writing the scholarly paper. For example, Amy could not really distinguish "what was required" and "what was being suggested." She said that she learned how to find key vocabulary and to pay attention to text in italics or bold font. Amy described,

The writing tutor pointed out key language to pay attention to and to watch for where they bolded and italicized text [in the instructions]. He also suggested that we do an outline according to the letters [i.e., the bulleted points on pages two and three of the details]. So, that really helped me to at least know how I was gonna format the paper. He helped get me started in the direction I needed to go.

Although this writing tutorial helped her to get started, Amy said that she was disappointed that the WAC writing tutor could not do more regarding “deeper learning,” and reported that the WAC writing tutor could not help the nursing students with research-specific or content-based writing requirements. Amy said,

The writing tutorials are limited in that they have helped me to get a foothold of what I needed to know [to write the assignment] and helped me decipher these instructions, but they weren't able to help me with nursing content, such as the application and critical elements of the compliance models or specific [nursing] strategies to managing the disease. . . . In fact, he even said ‘don't ask me anything about content, because I'm not a nurse.

Tonya claimed that she has never attended the writing tutorials for just this reason. In fact, she reported that word-of-mouth spread quickly that students would not get the nursing-specific help they really needed to write the most critical aspect of this scholarly paper (which was also the highest mark value of all other assignments in the course). Tonya said that she didn't go to nursing group-writing tutorials because the WAC writing tutors were “not specialists in nursing.” She would go, however, if there were both a WAC tutor and a nurse educator teaching the writing assignment because then students would get help with writing-specific as well as discipline- and nursing-specific challenges. Tonya reasoned,

They want us to go to the writing sessions, but I found that confusing. [The WAC writing tutor] doesn't know all the research and how to relate to concordance or compliance. He can tell us that compliance and concordance are obviously a big part of your paper, but he can't relate that to MS or take real-life situations and apply concordance. A writing tutor can help with introductions, and transitional sentences and things like that, and can explain

to us how to do that; but a writing tutor doesn't know about the theory or implications for nursing. I like it when the two are together. My instructor is the one who knows the steps to follow and, for scholarly papers, we need help from our instructor, not just a writing tutor.

In their chapter about influences on student's perceptions of undergraduate writing assignments at Brunel University (England), Catt and Gregory (2006) suggested that undergraduates would benefit from course-based writing tutorial support such as the one in my case study. However, they cautiously advised that providing such writing supports may create more problems for students than it solves because those in academic learning environments, such as classroom instructors, do not fully or adequately understand what an academic genre is or how to identify, define, teach, and assess the academic genres that are "placed centrally within the learning process" (p. 29). The scholarly paper assignment in my case study is a prime example of an academic genre at the center of student learning in nursing education. Catt and Gregory emphasized that several factors influenced (un)successful undergraduate writing of academic genres, including time and nature of feedback, amount of writing, marking criteria, and clarity of writing instructions, and pedagogical weaknesses in writing instruction to name a few (see also Chapter 1 of Beaufort, 2007, pp. 5-27; forward and preface of Bean, 2011, pp. vii-xx).

Like Tonya and Karen in my case study, Catt and Gregory encouraged collaborative writing supports involving both writing specialists and disciplinary instructors to help students write more successfully in their major area of study. The point of their chapter was to bring awareness to the deeper complexities of writing interventions and how writing assignment supports (like assignment-specific, course-based, and/or group-writing tutorials), even when attempted or employed in situ, have a limited impact on students' academic writing. They also

note that limitations are due to the “affective aspects of students’ academic literacy practices (Catt & Gregory, 2006, p. 21), such as student perceptions of teaching and learning writing assignments in college.

Large studies (Anderson, Anson, Gonyea, & Paine, 2009; Kuh, 2001; Rogers, 2008) and smaller case studies of college writing in the U. S., U. K., Canada, and Australia (e.g., Ahearn, 2006; Anderson, Best, Black, Hurst, B. Miller, & S. Miller, 1990; Beaufort, 2007; Belenky, Clinchy, Goldberger, Tarule, 1997; Carroll, 2002; Chiseri-Strater, 1991; Herrington & Curtis, 2000; Light, 2003; McCarthy, 1987; Morley, 2008; Oermann, 2014; Patton, 2011; Paxton, 2003; Schneider & Andre, 2005; Wake, 2010) have demonstrated that college students perceive different facets of learning how to write in the disciplinary environment that facilitates and supports their learning. College students at all stages of the writing process are synthesizing information and determining the writing supports they need to help them succeed.

As Bazerman (2012, p. 97) describes it, students are in the process of seeking *fluency and flow*, seeking to frame the writing task and situation with a “sense of self, stance, and disposition . . . which include not only [teaching/learning] structures associated with cognition and metacognition, language, and motor functions, but also social, emotional, and affective functions” of the disciplinary environment in which students are learning to write. The “ability to write clearly and fluently is undoubtedly one of the more important skills required” of undergraduates (Torrance, Thomas, & Robinson, 1999, p. 189) and effective writing is fundamental to success in higher education. However, what the second-year students in my study have recognized is that understanding the norms of disciplinary discourse and developing their own writing abilities in the context of that discourse is a slow, difficult, often arduous adjustment.

Student assumptions. Tonya and Amy expressed assumptions that directly influenced their learning and writing development. Tonya began to recognize her own assumptions about disciplinary writing distinctions and Katie began to recognize her own personal expectations about writing in nursing.

“Nursing is not the same as other disciplines,” proclaimed Tonya. “Grading is not the same, the writing is not the same as English, and the scholarly paper is different than anything else we write.” Now that she was in her second year, Tonya was still surprised at how tough it was to “write differently” in nursing. She remarked, “I always assumed that, in comparison to the other disciplines, writing in nursing would be fairly easily.” But to Tonya’s surprise, it was “tough to write a scholarly paper.” Tonya assumed that her writing skills from English would transfer to writing the scholarly paper in nursing. “This isn’t English,” she replied, “It’s different, totally new. The label throws you off that it is a ‘paper.’ But the writing we do here is a different format, with different expectations, and I didn’t expect that.”

I asked if she could describe what was tough about writing the scholarly paper, and she described it in comparative terms with writing in English:

I assumed that if you came from any type of English background where you do like to write and you do enjoy it, [then] writing in nursing would be easy, and that you would sort of find a lot of flow in your writing. I was surprised to learn that’s not the case. It’s hard to write with headings [i.e., APA style], you know, then write a description of disease, and then write about the prevalence of the disease, and then write about the impact of the disease on people, and to make that into an entire paper that kind of has, you know, links to [the assignment’s purpose of demonstrating an understanding of]

compliance and concordance. It was hard for me to find, I guess, a flow, for it to all kind of come together into one paper.

Amy also described how tough it was to adjust to scholarly writing and marking requirements of the scholarly paper in nursing. She assumed that a scholarly paper would be written and graded just like any academic paper that she had written before. She said, “I thought wrong” and continued, “I thought the scholarly paper was about research,” not writing about reviewing other people’s research. It was hard for Amy to “write scholarly” about nursing research. She assumed that she could (and would) write it like she would have written a research paper in other courses. She said,

It’s also a little tough that you don’t have any freedom to explore anything that might be more of an interest, or creative, even. Scholarly writing in nursing is about what you can synthesize from other nursing research. It is not about you or your personality. When you assume that going in [to the nursing discipline that] you can write like you did in English, you won’t do well.

Then, Amy described her dislike for the curricular grading practice in nursing, which she assumed would be straightforward but instead she learned that marking was on a graded curve.

This, she said, created a “competitive mindset” between and among the students. She continued,

And I think it also puts a little bit more pressure on us students, because were [graded] on a curve, you know, and you are compared with every other students’ paper, right? You’re not just judged for how good your paper is, but also for how good it is against everyone else’s. I didn’t know that coming in, and I didn’t think it would matter so much to the faculty, but it does.

Personal disappointment. Katie took a more personal perspective, blaming herself for “not getting it.” She had much success in high school, easily mastering required writing tasks. But now, after two years of college and writing the scholarly genre in her nursing courses, she thought she would have—and should have—mastered writing the scholarly paper assignment. She was obviously disappointed that she was not living up to her own expectations; however, over the span of four semesters, she had clearly learned a lot about herself in the context of this genre. For instance, she was maturing, integrating more professional characteristics into her writing, and thinking differently about her responsibility for learning with and through writing assignments. Katie was essentially beginning to realize that the scholarly paper assignment was a reader-centric genre with a communicative purpose that carried writer responsibilities. She said, “It’s my responsibility to find a way to put things into full sentences and paragraphs where tutors will understand what I’m getting at.” Then, Katie conceded, “And that is rather difficult. . . . Just because I’m aware of it, doesn’t mean it’s easy.”

In other words, learning to write the scholarly paper was a difficult, slow learning process for Katie, and she had to “make adjustments” from the way she wrote in high school. She said the first thing she learned was to adjust the way she thought about completing a writing assignment. In high school, she took on the whole writing project all at once. She tried that approach with the scholarly paper, and it didn’t work. She stated, “I no longer take on writing the whole thing. . . . If I try to take on the whole thing, then I just speak bogus . . . it comes out as BS’ing.” Katie did not want to become a nurse by BS’ing her way through writing assignments as part of her training. So, she learned to write differently. “Instead,” she said, “I have to look at my writing now as writing in stages, so that I can almost set mini-goals, so that I’m not just overwhelmed trying to do everything at once. . . . I have to find a thinking point.”

When I asked Katie how she finds that thinking point, and what that looks like as she writes the scholarly paper, she gave a very chronicled, almost mechanical answer and replied, I aim to start at least two weeks in advance, unless of course, I lose track of time or I am overloaded with other coursework, but . . . First, I printed off a variety of articles, highlighted through them, then I basically just opened a Word document, copy and pasted what I highlighted into the document, started sorting them into themes, and then paraphrased them so that it wasn't copywriting, and then put them into a format where they could work together and complement each other, into their categories of the format that I had chosen, and basically, just connected any thoughts that I had around it and put them into their respective paragraphs.

Rephrasing my question, I asked Katie if she could explain more about how she was learning to find that thinking point that she mentioned earlier and what she was learning through her writing approach. Katie opened up to a more personal side of learning to write, and later revealed that she actually avoided writing the scholarly paper for as long as she could because it required "a lot of mental energy." She made such comments such as, "I have to prepare my mind mentally that I am gonna write this paper," "I have to brace myself before diving in," and "I'm literally flailing until I figure it out." These mental and emotional preparations were a real part of Katie's writing process because they were a real part of her self-perceptions about scholarly writing.

At first I thought this was regressive self-talk that reinforced Katie's belief that she wasn't good enough, smart enough, or quick enough to "get it"—as if scholarly writing in nursing were a natural ability rather than hard work. But, hard work is exactly what Katie was learning. She was learning that writing in nursing was hard work and completing the scholarly

paper assignment required persistence because other things got in the way. She had self-induced disappointments and expectations, lacked time management skills, and felt the shortfall of mental and emotional acuity needed to write the scholarly paper in nursing. However, Katie was adjusting to, for, and because of them. She affirmed,

I do not have the gift of scholarly writing, but I definitely try to write scholarly, and if I want to succeed, then I can't think about it all at once. [Our group writing tutor] has said, 'you don't have to get overwhelmed by writing it all at once. Write 500 words a day.' That's a great idea, but realistically, I guess, my brain starts to conk out. Sometimes I start searching for articles, but don't find the right one. Sometimes I choose a topic I like, but I can't link it to practice. Sometimes, I want to work with adherence, but compliance is the better fit and I don't know how to make it work. Sometimes, I can't keep them straight, adherence and concordance, compliance, concordance, adherence, adherence, compliance, concordance, MS, MS, compliance. Honestly, they just kept going on and on in my head all night long, and that kind of drives me crazy. If I am gonna work on this paper, I have to set my mind on it, and prepare my mind mentally that I'm gonna write this paper.

Student Connections

Professional development. By the end of Year 2, Students were beginning to recognize that personal disappointments, academic shortcomings, and unexpected difficulties were bound to happen but they were also a part of intellectual growth and professional development. Katie concluded that writing was hard work and required persistence but she had a firm belief that there was a payoff at the end. "It's a hard adjustment," Katie acknowledged, "but I am beginning to understand that writing in nursing is different and challenging. But it's a good different and a

good challenge, because it's contributing to my professional development." There was a long pause. Katie returned to the metaphor she used earlier, and with relieved connotation, concluded, "I guess I'm learning how to swim on my own."

Katie wasn't the only one to realize how writing the scholarly paper was contributing to her professional development. Amy didn't use the metaphor of swimming to explain what she could now do on her own, but she did say that "after a couple of years in nursing" she could learn more things on her own without the assistance of her tutor. For example, she could recognize appropriate nursing interventions with certain diseases and that put a smile on her face, "I'm actually remembering terminology on my own, especially for advocating nursing interventions. I remember what certain professional words mean in context because I've written about them over and over."

Tonya was beginning to realize that "paying attention to details" was not only important in scholarly writing but in nursing practice. For example, she stated, "Paying attention to medication details was critical to patient health and safety." So was following directions for writing this paper. As a student, Tonya was teaching herself to pay careful attention to assignment instructions because she said, "as a nurse, I will need to make sure patients follow instructions carefully." She recognized that "details" were not trivial; just as writing assignment details were important to the academic success of a student, medication details were be important in the life and death of patients in nursing practice.

Brea shared the valuable role that the scholarly paper played in her professional development and she nicely framed ways in which she was beginning to understand scholarly writing as a link to informed practice. This was her fourth scholarly paper, and with the luxury of such repetition, she was "getting better at doing lot of things that applied to nursing practice."

For instance, Brea said that she was definitely getting better at “concentrating on nursing interventions and nursing implications.” She remarked that, in the first year, she did not know these were important to nursing practice. “Now,” she replied, “that’s become a lot clearer and I know to concentrate on that now in my scholarly papers.”

Brea was eager to express that she had figured this out and “felt really good about” selecting “trustworthy articles” that would help her as a clinician. She said that learning how to recognize “trustworthy evidence” was hard work but taking a concurrent course in nursing research helped her evaluate articles more reliably. She said,

Now, I know how to pick out articles that are going to help us in our practice. Like, whenever I come across a condition I don’t understand, or I am unsure how to react to a particular nursing situation, I can turn to these articles for help. I do not think I will ever be a researcher, but these articles really do help in the sense that they can be applied directly and immediately to my practice as a nurse, wherever I am.

Brea’s voice tone and body language were noticeably more confident. She was so pleased to tell how important it was to find and report research that was not just helpful to her but to her peers as other soon-to-be practicing nurse. She was after all in the caring and helping profession and she truly enjoyed sharing what she was researching with others. Brea was beginning to recognize one significant disciplinary value: the importance of peer relationships in nursing. Peer relationships and learning from peers was an obvious pedagogical practice in the classrooms that I observed in my case study. Katie and Brea represented second-year students who were in part beginning to recognize personal, academic, and professional connections as they advanced through this self-directed and context-based learning baccalaureate nursing program.

Year 2 Informal Interviews

After I conducted, transcribed, and analyzed participants' semi-structured interviews, I placed a call for short, 30-minute informal interviews with second-year students to get feedback on my understanding of what the other five participants said about learning to write the scholarly paper assignment. No students volunteered. However, three instructors wished to participate in informal interviews, so I conducted an informal focus group with them. All three instructors agreed with the findings that I presented in this chapter and concurred with the students' reported writing challenges and connections to learning.

Instructors wanted to share their own respective challenges of teaching the scholarly paper. They agreed on seven major challenges facing instructors, which are listed below. They also wanted it noted that these were teaching challenges across the board not just in second year and not just with the scholarly paper; all of them taught other kinds of assignments in other year levels. Before the focus group ended, I asked if they could recommend any suggestions that would better enable teaching the scholarly paper.

Challenges of Teaching

Instructors said that the following seven challenges were an honest representation of challenges and that all instructors faced one or more of them regularly: (1) Minimizing students' stress; (2) Collaborating with other instructors; (3) Explaining instructions to students; (4) Giving feedback/comments on student writing; (5) Teaching terms, language, and content; (6) Norming sessions for marking; and (7) Evaluating themselves as teachers.

Suggestions for Teaching the Scholarly Paper

The instructors offered two suggestions: (1) Change the assignment guidelines to be consistent with the marking guidelines; and (2) Redesign the scholarly assignments in years 1

and 2 to help students work on reviewing and summarizing skills. One instructor said, “Currently, we ask them to find articles to support their claim, when they really need time to digest it and get used to reading them. We think this will help them write more effectively in upper years.”

Year 2 Classroom Observations

Although there were no student volunteers for informal interviews, there were students from my classroom observations who experienced similar challenges and connections as the student participants. I conducted nine classroom observations in three different course sections during which students and instructors discussed this scholarly paper assignment, asked questions, and shared suggestions for writing and/or writing supports. Below are the most frequently discussed challenges of writing the scholarly paper, followed by a short commentary on the most divisive question, and the most commonly stated suggestions that reflected how students felt about writing and/or the kind of writing support they have received thus far.

Most Frequent Writing Challenges

Second-year students spent most of their class time discussing three writing challenges: (1) How to organize the topic and individual ideas and thesis statements; (2) How to find, use, and cite nursing research articles; and (3) How the components of the paper differ, such as the introduction, conclusion, and abstract. Students felt they were just repeating themselves throughout.

Most Divisive Question about Learning to Write the Scholarly Paper

Since the scholarly paper is a genre that requires students to write from secondary sources, students naturally questioned their instructors about nursing literature and more specifically about primary research articles. One question that created multiple, often opposing answers, was the question, *What is a primary nursing research article?* This was the most divisive question

because any discussion or attempted answers by instructional tutors about peer-reviewed nursing journals included nuanced vocabulary about the different kinds of articles published in the nursing discipline and profession. Terms, definitions, and descriptions for peer-reviewed articles, scholarly articles, research articles, and primary research articles were used interchangeably and this confused the students. Students, instructors, course leads, year coordinators, and even librarians all had different perspectives about what is and what constitutes a primary nursing research article. Here is an incomplete but sufficient list of direct quotes to illustrate the range of responses. A primary nursing research article:

- must have an RN is behind one of the author's name (student);
- has nursing or nurse in its title (instructor);
- should be at least 8 pages long (course lead);
- is research that is done first hand (student);
- is a nursing study with a question (instructor);
- is an article with 50% or more citations from nursing journals (student);
- has at least one nurse among the authors (instructor);
- reports original research (librarian);
- contains keywords such as study or research (librarian); and
- can be from Stats Canada (instructor).

Year 2 Student Suggestions

There were three common suggestions by student participants regarding learning to write the scholarly paper:

1. Reduce the number of assignments or at least have less structured writing. One student suggested, "We need writing that eases us into nursing research." Another

- student said, “We don’t do research papers; we review research and we need practice [learning how] to do that;”
2. Replace writing tutorials with in-class writing help. Students thought “writing tutorials were ok” but what they really wanted was to have the instructor be a part of it; and
 3. “Do away with the general guidelines for scholarly paper writing.” Students felt the current guidelines had “too much text” with “vague language that’s hard to get our head around.” One student concluded, “it just doesn’t relate to the assignment at hand.”

Year 2 Closing Remarks

This chapter discussed the challenges and connections that second-year nursing students and instructors faced when teaching and learning to write the scholarly paper, which were deeply influenced by curricular and instructional design and personal assumptions of teaching and writing that did not always live up to expectations. The instructor assumed that written and oral instructions were clear and straightforward enough for students to understand what how to get started on their own. However, explaining the assignment details and articulating the marking criteria to students were a perennial challenge to classroom teaching. No matter how explicit she made the writing instructions or how often she repeated her expectations, students still did not get it. She provided in- and out-of-class writing supports, which she and her students appreciated, but writing supports only partially helped students learn how to write the scholarly paper.

The students assumed they would be more comfortable with writing the scholarly paper by the time they reached their second year in the program. They expected to use terminology, definitions, and professional (nursing) language more precisely; and they wanted to be more

confident in using technology, such as word processing applications, library search tools, and the eClass management system, reading scholarly paper instructions and internet search results, and writing with sources such as primary nursing research articles and adherence/compliance models. In other words, second-year students not only expected to have confidence in understanding and performing recurring learning activities, they wanted to have the confidence to integrate them into their process of writing scholarly paper assignments when called upon to do so. But they were still trying to figure it out.

However, connections were beginning. Writing the scholarly paper was the most challenging genre of the discipline but some students looked upon the challenge as an opportunity for personal and professional growth. That growth was very slowly beginning to form and shape students' self-directed learning of writing their own scholarly papers. Writing developed slowly, almost arduously. Students understood that consistently good grades were not necessarily indicative of getting better (or being better skilled) at writing the scholarly paper and they clearly wanted to get better at connecting their learning (through writing the scholarly paper) to professional development.

Overall, second-year students tacitly perceived professional development in terms of personal, social, and relational growth and maturity. These second-year students were sort of in a tween-ager stage of learning to write the scholarly paper. Writing was awkward, unpredictable, and emotionally demanding, and not quite understood in perpetuity. Students could not quite articulate yet their need to develop and sustain a rhetorical understanding (i.e., clear sense of purpose and awareness of reader/marker) of writing and its connection to nursing practice. And it didn't help that for the last two years, assignment instructions, marking details, and instructor preferences were inconsistently communicated to students.

Year 2 Summary of Findings

This chapter presented responses from five individual semi-structured interviews with four students and one instructor and included one informal endorsement focus group with three instructors, all of who talked about their experiences of teaching and learning to write one scholarly paper assignment from one second-year tutorial course. Student responses focused on challenges and connections to learning to write this particular assignment according to a broad range of assignment criteria. The main findings were:

1. Assignment instructions were too detailed, almost over-detailed. Students found them difficult follow them because they just couldn't parse the dense language used to describe the writing requirements. The challenge to learning to write the scholarly paper was that students did not get started quickly nor did they feel this was a manageable assignment, meaning students did not feel they could actually accomplish it before the due date or completely fulfill each and every requirement. Problematic parts of the assignment instructions were:
 - a. Two incongruent purpose statements: one purpose statement was explicitly in the overview section and the other purpose statement was its own section with a bulleted list of statements that appeared to be more like learning outcomes or objectives than a purpose statement;
 - b. Research article definitions: students were required to choose different kinds of nursing research articles, such as clinical articles, theoretical articles, primary research articles, and/or other health discipline articles. However, in classroom discussions, there were inconsistent and/or incongruent definitions or descriptions about what nursing research articles were and/or the appropriate uses for them in the context of this scholarly paper assignment; and

- c. Too many action verbs: explore, select, conduct, describe, examine, demonstrate, identify, compare and contrast, apply, illustrate, develop, introduce, explain, recommend, just to list a few.
2. The instructor valued in-class and out-of-class assignment supports. She provided two kinds of in-class supports that students found beneficial to getting started with the assignment: housekeeping sessions and a 30-minute assignment-specific guest lecture by a writing specialist. Out-of-class writing supports included peer-group writing sessions with the guest lecturer/writing specialist to help students through the process of writing the scholarly paper. Both in- and out-of-class writing supports were beneficial for gauging students' individual writing and learning needs and providing on-demand, needs-based writing supports.
 3. There were limits to out-of-class writing supports like course-based, assignment-specific, and peer-group writing tutorials. Students expressed that learning what and how to write from individuals outside the nursing discipline could only help to a point. The limitations to learning how to write the scholarly paper were:
 - a. Writing supports didn't help students with research-specific or content-specific writing requirements. This was the biggest disappointment to second-year nursing students, who spread the word quickly amongst peers that they didn't teach nursing-specific content and scholarly writing practices;
 - b. Writing supports could not help students with unstated, illusive, and ambiguous definitions and expectations of the assignment. Implicit and explicit assignment expectations tended to blur and blend with a range of people and places that were out of the control of a writing tutor, ranging from the students themselves to instructors,

- faculty, friends, disciplinary competencies, professional standards of practice, personal learning goals, and so on;
- c. Explanations by writing tutors were usually clear and logical during the session but not easily remembered by students when it came time to compose on their own. For instance, watching a writing tutor compose an introduction in session did not transfer effectively when students attempted to write it on their own. Rather, writing tutorials were more effective when students brought complete drafts that they could revise and edit in the session (but students rarely did this); and
 - d. Students had personal writing challenges beyond the help of a couple tutorial sessions. Students carried comprehensive and/or compounding writing problems, which one-half of participating students said they have carried since high school or even earlier.
 - e. Scheduling conflicts prevented students from using the supports. Sometimes tutorial sessions were full, appointments were completely booked, or students' work/ class schedule conflicted with writing tutorial schedules.
4. Students' own assumptions about writing constrained learning to write the scholarly paper. Students assumed that:
- a. What they learned about writing in English would transfer to writing the scholarly paper. They were surprised to learn that the nursing genre had a different format, style, structure, organization, and citation system;
 - b. If they were a good writer in high school or other subjects then they would write well in nursing. They were surprised to learn how difficult it was to write a scholarly paper;

- c. Writing the scholarly paper would be like writing any other research paper. They were surprised to learn that the scholarly paper was not a research paper—they couldn't even call it a research paper in nursing education; and
 - d. Writing in nursing would be like writing in any other discipline or subject area. They were surprised to learn that writing was tightly linked to the CBL (context-based learning) curriculum design, disciplinary traditions, and professional standards of practice.
5. Students experienced personal disappointments. After two years and four scholarly papers, students were disappointed when they did not live up to her own expectations of writing better. Students knew that good marks were not indicative of good writing, meaning just because they received consistently good marks on their scholarly papers, it did not mean that with each subsequent paper, they were learning to communicate the genre more clearly to their readers/markers. Students felt partially and sometimes fully responsible that they could not adjust more quickly to new ways of writing or to different expectations placed on them by their markers or instructors (i.e., adjusting to tutor's writing/marking preferences). A surprise finding was that personal disappointments *positively* challenged self-directed learning. Students developed their own resiliency to emotional ups and downs, persistence to improve writing habits, and determination to connect lessons learned from scholarly writing to professional nursing practice.
6. Students were beginning to connect scholarly writing to their professional development. With the repetition of writing the scholarly paper, some students were getting better at remembering terminology, concentrating on interventions, including implications when

assessing and creating health care solutions, and building their own habits of mind. Students mentioned three areas of growth:

- a. Students prepared themselves mentally and emotionally to write the scholarly paper in stages rather than writing it all at once, which was how they often wrote in Year 1. Writing in stages created thinking points. Students' scholarly writing included well-thought choices of nursing interventions that were now more clearly organized than before. This improved students' overall communication and critical thinking skills;
 - b. Students took initiative to search and review nursing research on their own, especially when faced with a new or unfamiliar health problem or nursing situation. With the aid of a concurrent nursing research course, students were finding reliable, trustworthy articles about nursing interventions and health care solutions. To make a claim with evidentiary support improved students overall confidence in being a well-informed nurse practitioner; and
 - c. Students were teaching themselves to pay attention to details. Students rationalized that reading and deciphering lengthy assignment descriptions could be just as difficult as a lengthy patient history and difficult medication prescriptions.
7. Informal endorsement interviews revealed that instructors had at least 7 different kinds of teaching challenges. All of the challenges were relational and emotional in nature, including reducing students' stress about writing, giving descriptive feedback so students can improve their writing, and collaborating with other instructors, especially about norming and leveling the marking of scholarly papers.
 8. Other findings and suggestions for teaching/learning how to write the scholarly paper genre:

- a. Any discussion about nursing research articles was divisive to learning how to write the scholarly paper. Questions that divided people were: What is a primary nursing research article? What counts as evidence? What is a reliable and trustworthy article?
- b. Replace general scoring guidelines with assignment-specific marking guidelines for each scholarly paper the students write across all four years;
- c. Redesign the scholarly paper assignments in Years 1 and 2 to help students review and summarize nursing research skills; and
- d. Provide in-class writing supports where the classroom instructor partners with a writing tutor.

Chapter 5

“It’s All Coming Together”: Learning to Write the Scholarly Paper in Year 3

Year 3 Assignment Description

The third year writing assignment was titled *Scholarly Paper Assignment*. Figure 9 shows the assignment details from the course outline, and states the assignment name, length, mark value, late penalty, format, style, and notes that paper topic details are forthcoming as a course addendum. Figure 10 shows the assignment details from the course addendum (hereafter called addendum), which was made available to students via eClass (also called the Moodle) during the first week of the course. The addendum was one page, which differed dramatically from the second year scholarly paper assignment addendum of four pages and included assignment length, due date, late penalty, format, marking evaluation, reference requirements, submission protocol, topic, scenario, prompt, and task.¹⁴ The “General Guidelines for Evaluation of the Scholarly Paper” was provided on page 11 of the course outline (Appendix P). All assignment descriptions and evaluation guidelines in this chapter are used by permission of the case study Faculty.

¹⁴ Some scholarly paper assignment information differed slightly between the course outline and addendum. For instance, the course outline included details such as the mark value and the addendum did not include the mark value; the course outline stated a length of four pages *excluding* title page, abstract, reference list, and appendices; the addendum stated a length of seven pages *including* title page, abstract, and reference list; and the addendum included details such as the topic, prompt, and due date, which the course outline did not include.

Figure 9

Year 3 Scholarly Paper Assignment Description from Course Outline

10

Services. Your eLearning course contact is listed inside each course site. They will be happy to assist you and answer any questions or concerns you may have regarding the technologies used for course delivery. You can also browse through their website at:
<http://www.nursing.ualberta.ca/TeachingLearning/eLearning/>

Please Note: If you do not see a link to a nursing course you are registered in, if you see a link to a course you are not registered in, or if there are any additional nursing sites you need access to, please do not hesitate to contact clearning@nurs.ualberta.ca with your questions.

ABSENCE FROM EXAMS:

Deferred exams occur only when there are compelling reasons, such as incapacitating illness and severe domestic affliction as stated in Section 23.5.6. of the University of Alberta Calendar 2012-2013. Students are required to follow the process outlined in Section 23.5.6 should they wish to apply for a deferred exam.

The Faculty of Nursing has designated the following dates for deferred exams:

- **Saturday, November 3, 2012** in Room ECHA 1-190 for all deferred final exams for Fall 2012 6W1 courses. Start Time: **0900 (single exam)** and **1300 (if writing a second exam)**

1. SCHOLARLY PAPER

Length of paper: **4 typewritten pages (12 font, double spaced)** excluding title page, abstract reference list, and appendices.

Value of paper: **30%** of the term mark

Late Paper: **10% mark reduction per day for papers handed in late** without prior consent of tutor.

APA Format: APA format is required. In NURS **6W1**, nursing papers must include an **abstract as well as headings** throughout the paper. See APA manual for guidance.

Paper Topic: Details related to the scholarly paper topics will be handed out as a course addendum.

NURS **6W1** CO Fa12 6W1 Approved August 2012

Figure 10

Year 3 Scholarly Paper Assignment Details from Course Addendum

[REDACTED]

Scholarly Paper Assignment:

TOPIC: Patient Abuse

Patient abuse is a serious offense that, when committed, must be promptly addressed.

You are a Registered Nurse (RN) in an acute setting. You over hear one of your RN colleagues verbally abusing a patient. Outline how this situation must be dealt with legally/ethically and professionally

Assignment Format:

Length of Assignment:	Page 1:	Cover Page Note: a) Course Number (NURS [REDACTED]) b) Section Number c) Student ID# only d) Tutor First & Last Name
	Page 2:	Abstract
	Page 3-6:	Introduction/Body of Paper/Conclusion
	Page 7:	Reference List (Number of references is based on the discretion of the

Due Date: Monday, October 1st (At Beginning of Tutorial).

Late papers: 10% grade reduction per day for papers handed in late without prior consent of the tutor.

APA Format: APA format is required. In [REDACTED], nursing papers must include an **abstract as well as headings** throughout the paper. See APA manual for guidance.

Grading: The assignment will be marked according to the *General Guidelines for Evaluation of Scholarly Papers* with the Course Outline (p.11).

References: A variety of references will be required for this assignment.

Submission: Bring paper copy to tutorial and/or E-Mail directly to your Tutor as requested by your tutor.

The stated due date of October 1st meant the students had six weeks to complete the assignment from the first day of class. There was no stated purpose in either the course outline or the addendum, and there was no assignment-specific marking rubric given to the students. Although not explicitly stated, the scholarly paper was due in six weeks time, the audience for the scholarly paper was the student's instructor, the marker was the student's instructor, and the students were given opportunity to receive in-process feedback from his or her instructor.

The topic was *patient abuse*. There was a definitive, positional claim: *Patient abuse is a serious offense that, when committed, must be promptly addressed*. There was a proposed scenario in two short sentences: *You are a Registered Nurse (RN) in an acute setting. You over hear one of your RN colleagues verbally abusing a patient*. There was one stated writing task/prompt: *Outline how this situation must be dealt with legally/ethically, and professionally*.

Year 3 Participants

There were five (5) participants who responded to the call for volunteers. They were all students: Amber, Anita, Carmen, Tina, and Edward. For the purposes of this case study, which was exploratory in nature, my doctoral advisory committee and I agreed not to collect personal or demographic information such as age, ethnicity, GPA, academic standing, teaching tenure, or the like, so that I could focus on exploring interactional aspects that enabled/constrained how students learned to write this assignment. Therefore, no descriptive information about participants is provided in this thesis. Therefore, no descriptive information about third year nursing student participants is provided in this thesis.

Students were not asked why they participated in the study but all of them openly expressed care and concern about how writing assignments are taught and assessed in the nursing baccalaureate collaborative program. All five students expressed a desire to improve

communication, especially in the classroom with their course instructors and assignment markers. By sharing their current experiences with learning and writing the scholarly paper assignment in their third year of nursing education, they hoped their participation in this study would help to contribute to that improvement for future nursing students, instructors, and coordinators.

Year 3 Data Analysis

Year 1 and Year 2 interviews began by asking: *What was your experience of writing the scholarly paper in [name of course]?* Year 3 interviews also began with that same question. However, the researcher added the following question during third year nursing student interviews: *What would you say connects your learning to professional development through the scholarly paper assignment?* This is the question that guided the year 3 data analysis stage and helped identify patterns of what third-year nursing students said about learning to write the scholarly paper assignment.

Interviews with all five participants were transcribed verbatim and read three times each by the researcher. Before coding began, the transcripts were emailed to participants for review and approval. One student participant corrected a reference she made regarding an assignment in another course. This correction was duly noted and revised in the transcript. The revised transcript was emailed to and approved by this student. Another student participant replied with a detailed explanation to clarify the meaning behind one of her quotes in the transcript. The researcher fully incorporated that explanation verbatim into a revised transcript. The revised transcript was emailed to and approved by this student. Both revised transcripts were subsequently aggregated into the data prior to the coding stage.

After approval was received from all five participants, I followed the same procedures for data analysis as those described in Chapter 3. Likewise, Year 3 findings were triangulated

through informant-validation and formal consultations with an interdisciplinary committee of specialists from nursing, education, and writing studies and discussed with my doctoral co-supervisors to ensure that both the data collection and interpretation were appropriate and within the study's proposed objectives. Discussion included an awareness of evolving patterns/themes in this dataset (year 3) that differed from the patterns/themes in previous datasets (years 1 and 2). Finally, all five participants were asked to review a brief summary of findings and invited to add further comments, thoughts, and/or ideas. There were no additional comments.

Year 3 Findings

The third year nursing students' responses led to the emergence of four (4) major categories: assignment design, classroom discussion, assignment-specific dialogue with key individuals, and assignment-specific group writing tutorials. The conversation began by asking students to describe their experience of writing their fifth scholarly paper in their nursing tutorial course.

Assignment Design

There was agreement by all five students that this assignment design was "different" from the previous four scholarly papers (written in Years 1 and 2). When asked what was different about it, they identified that the "assignment instructions" and "the assignment topic and sources" were different from what they "were used to."

Instructions. Participating students reported that they often expected consistently written assignment instructions across the years. All five claimed the instructions "were different" from those of previous years. What made them different was that this year, the scholarly paper assignment instructions were, in their words, "straightforward." By straightforward, students meant that they found the following features of the instructions helpful: a *short* scenario, a *clear*

and concise prompt, and a *well-structured* layout of the instructions. “Last year,” Tina noted, “[T]he instructions were four pages long. This year, the instructions fit on one page.” Anna echoed Tina’s sentiments, “[they] didn’t need a whole page to get into the topic.”

The structure of the prompt also appeared to help these students in the following three ways. First, it helped them get started because there was a defined context. Anita commented, “it [the prompt] tells you what it wants very specifically [...] you’re a registered nurse, and you’re in an acute setting. So, right there you are limited to your work environment.” Edward said, “You know that it is a RN [registered nurse]. So, you automatically know which regulatory body that you are going to report them to.” Second, the prompt helped students focus their thinking. Amber concluded, “There was really a focused way to write it. For instance, you have this ethical issue [...] there are ways that you have to follow and do things. . . . I can make a thesis from a prompt like that!” Tina liked the fact that she had to “write it their way.” She noted that this scholarly paper was “not an opinion piece” nor did she have options such as those found in her second year scholarly papers. Rather, in this paper, she stressed, “I have to be very professional and I must follow the right steps.” Third, the prompt motivated students to engage in challenging problem and a real-world nursing situation. “You weren’t just told to ‘talk about ethics,’” Carmen explained as she gestured quotations marks in the air with her fingers. “The question itself is posed in a way where you had some complicated problems. I mean, really, in this situation [...] whether you do A or B, no matter which choice you make, there are going to be consequences.” In essence, the structure of the prompt, combined with the structure of the topic, challenged their intellectual development by tapping into ethical dilemmas of nursing practice and the importance of abiding by the rules, guidelines, and regulating bodies of registered nurses.

Topic and sources. Participating students reported writing challenges in spite of a well-structured prompt. The topic placed a strong emphasis on reading legal documents and professional policies, most of which were new sources. Anita said that locating these sources through online search systems was “very challenging,” which added to the stress of completing the assignment in such a short period of time. Tina reported that writing from required sources and reading new genres of nursing literature were still problematic in third year, and not getting easier. Tina stated,

In the past, we used textbooks and research articles. Those are hard enough and some of us still can't read them. But we get by. We can write something from sources like that. What we don't know is how to read these legal documents and incorporate them into our [papers].”

However, as the students told me how they worked through this challenging topic, students appeared to transform their self-perception more positively. Students were no longer seeing and thinking of themselves as students but as nurses. Bain (2004) suggested that this part of the writing process taps into something natural and self-fulfilling. In his 15-year study of what the best college professors do, he noted that the best writing assignments are those that “challenge [students] to grapple with ideas, rethink their assumptions, and examine their mental models of reality” (p 18).

Carmen made the comment, “this topic moved us into standards of practices . . . but not *just* standards of practice . . . it put us into the reality of a difficult situation.” Carmen said she was more motivated to write about the topic because the topic challenged her to think differently, not only about the role of a nurse but about herself as student nurse and the choices she would make as a nurse. Carmen continued, “It is hard to grasp that you might be going into a profession

where you have to choose, and [no matter which choice you make], they both might have a negative effect on you.” L. Dee Fink’s (2003) study of significant learning experiences in the STEM disciplines (i.e., science, technology, engineering, and mathematics) found that students gained a fuller understanding of the subject’s underlying conceptual structures when students could imagine and envision themselves in the decision-making process (p. 36; 42). Amber also imagined and envisioned herself in the situation, and apparently spent considerable time reflecting on her response, “This was a tougher concept than we had in previous years. . . .We had to examine ourselves and how we would react if we saw an abusive situation. I spent all six weeks thinking about this.” Edward also spent considerable time thinking about the “political aspects” and “regulatory constraints” that would affect his actions as a nurse.

Edward was equally aware of the decision-making difficulties and the underlying tensions of the profession. He explained, “I mean, the real tension is this idea of advocacy, right? Who is the student nurse supposed to advocate? The patient or the colleague? The profession or the care?” Then he further elaborated,

The whole profession is very political. It is very political because we have very strong connections or very strong ideals about being advocates. That is why we have CNA and all these conferences and [faculty] really try to support us to go to these things because they want us to be more political and stand for the profession and make a difference.

There really has been a huge difference, lets say, [from] 10 years ago to now. Our scope of practice is more developed now . . . nurse practitioners are taking on more of the physician role, there is more patient trust, and we are advocating more. We have to advocate for their rights. They might not be heard or they might not even be wanting to voice themselves. We have a responsibility to the profession.

Edward's response helps to demonstrate that this scholarly paper assignment topic prompted students to engage with practical, real-world thinking. An ability that, according to Scardamalia and Bereiter (2006) will have extensive value in students' personal, social, and professional lives. In their substantive research and development of *knowledge building pedagogy*, Scardamalia and Bereiter advocate for writing assignments that integrate discipline-specific topics with compounding or perplexing challenges of the real world because such assignments foster emergent understandings of personal, social, and professional ideals and values. The topic of this scholarly paper assignment directly helped students to address the production and continual improvement of ideas of value to the nursing profession, such as self-evaluation, organizational politics, regulatory constraints, and advocacy rights and responsibilities. In fact, another value identified by Carmen, was that of understanding how to use professional and legal documents of governing agencies in nursing practice. She believed that understanding the professional documents and protocols of regulatory bodies and how they affected her as a clinician was a step toward becoming a professional nurse. Carmen continued, "I *have* to look to professional bodies and documents because there *are* regulations. Sometimes, I think, oh, I don't want to read CARNA, but when I'm looking at [the documents], I think, oh, I really do need to know these things."

Finally, Amber noted that the scholarly paper was "less stressful to write" because the topic was "useful." For her, useful meant, "I was making that link to learn what I was supposed to be doing to better myself as a nurse." Anita, Tina, and Edward reported similar remarks, such as, "I found this topic relatable and very relevant;" "I felt I was able to contribute something intelligent to this topic;" and "I got a real understanding of what I was looking for in nursing

research and to bring it into knowledge transfer and translation and into practice. If all the papers were like this, then that would be useful.”

Anita said that she really liked this topic because it was useful for learning how to articulate the complexities of nursing. She recognized the topic as a tool for learning how to communicate often perplexing, difficult, and sensitive nursing situations. She emphasized, “This situation [the assignment scenario] is political, personal, and legally complex. If this is supposed to be conducive to our learning, then we also need to understand what the topic means and how we are going to communicate those complexities. This topic teaches us to write something, not for our marks, but for our learning [and] for our lives as professional nurses.”

Anita brings us to an excellent point about communicating the topic and the significant role of written communication in her professional development. Nursing students are also developing as writers, thinkers, and communicators. They are engaged in a personal process of learning how to articulate the complexities of the professional nursing workplace and in a very academic way. In her short but practical article on developing teaching strategies for scholarly writing in nursing education, Susan Dewar (2012) emphasizes that the skill of writing is as complex as the skill of nursing, “The skill and art of writing, like any complex intellectual endeavor, requires modeling, mentoring, and opportunities for safe practice if students are to break through the barriers that keep them from becoming confident, competent writers” (p. 144). Anita and the other third-year nursing students in this case study claimed they were given opportunities that helped them break through the barriers of writing the scholarly paper. Most important was the opportunity to talk about the topic and ask questions.

Classroom Discussion

During my interviews with the five nursing students, they often recalled the challenging writing task: *outline how this situation must be dealt with legally/ethically and professionally*. All five students reported that they needed to “visualize” themselves in such a scenario before they could begin writing the paper. Anita explained, “We are challenged to apply nursing implications and we are challenged to really apply what it means to be a nurse in the context of the topic. That I find is *invaluable* [to my writing]. Therefore, we have to *talk* about our competencies and we have to put ourselves at the level that you are a registered nurse, and that the nursing implications can impact someone else, that is, your imaginary person in the scenario.”

One way students were able to do this was through classroom discussion or talking as a group with their class instructor and peers. Talking as a group appeared to help students collaborate and contribute different perspectives on professional practice, to raise personal uncertainties about professional practice, and create a group norm, or as Carmen called it a *group mindset*, about appropriate responses to such a scenario. Carmen said that the current [pedagogical] structure of CBL (Context-Based Learning) certainly fostered class discussion as a way of learning and writing. Carmen noted,

We do need class dialogue because this really impacts the paper writing. . . . Now that we are in our third year, we are not so formal and more comfortable with each other. We know each other now in class [and] because of the way the class is structured, everyone is contributing, and we have this group mindset to try to understand the scenario. . . .

This group mindset helps us [get] through the complicated issues [of the assignment].

Carmen’s response helps to articulate specific ways in which nursing students value classroom discussion as a dialogic community where they learn to produce new knowledge for

themselves. Zull's (2002) research in the neuroscience of learning recommended that students need communal dialogic opportunities to build new knowledge. Zull continues to explain that in order to move the learner from "a receiver to a producer" of new knowledge (p. 33), the brain needs two engage in two motor functions: speaking and writing (p. 16). Students actively *begin to write* the assignment when they talk about the topic collectively in class with their teacher and with their peers.

Amber told me that part of her "pre-writing process" required thinking through the many different ways she would or could respond to a complicated bullying scenario, like the one posed in this assignment. She claimed that having classroom discussion, with her peers and instructor in the room, allowed her to safely express the many different emotions she would feel if she were the RN in the scenario situation, the most salient of which is fear. Amber affirmed, "I would be afraid to act if I saw a nurse bullying a patient. I would feel frozen ... I would need to talk about how I would prepare myself for that." She recalled the importance of talking about her fear and how she would overcome her fear. She asked, "So, what do I need to do to prepare myself for that? Well, the key in that situation is to act immediately. If you don't act soon, to nip it in the bud, it just keeps going."

For Edward, classroom discussion was more like a "sounding board" to "bounce back ideas" off each other. He said class discussion is also a place where he can actively engage in a conversation with his instructor, learn from an experienced nurse practitioner, and build some confidence about decisions he will make as a nurse. Edward said the prompt was very challenging, and he wanted to learn from his instructor, "How do we respond as a professional nurse?" Then he continued,

We don't actually know how the profession is supposed to act in a certain way. When we have class discussion, we can ask our instructor. . . We [asked our instructor] to give us idea[s] of what the profession would actually want us to do. . . And then I can decide what *I would do* [student's emphasis].

Tina's learning experience differed from that of Carmen, and Amber, and Edward. For Tina, classroom discussion was a place to "observe" and listen to the multiple questions and queries of her peers. She said it helped her clarify, link, and extend her own questions. She said she always came to class prepared, with her own questions, but never really talked much in class. Listening to the others helped her think more deeply about this already complicated scenario. She really felt this scenario was a dilemma, and finally worked up enough nerve to ask her instructor, "Who can we approach, who do we go to, so that this stays really confidential?" She said her instructor provoked "a good discussion" about organizational relationships and procedures within the system. Tina recalled,

Right off the bat, [our instructor] discussed professionalism. We went over stuff [i.e. a disciplinary flow chart] from CARNA and CNA, so I had the tools to get going. . . . I started seeing links between what we were supposed to research and what we were supposed to write.

Explicit expectations. Nursing students also valued classroom discussion as a place to make known explicit expectations by their instructor or marker. About two-thirds of participating students reported their instructors often discussed expectations in class, but students claimed the discussion was often limited to concerns about citation, reference criteria, mechanics, formatting, or style. Examples students shared were instructions such as, "no research before 2000," "no more than four-and-one-half pages," "no, you cannot write less than four pages," "no references

without citations in the text,” and “don’t use ‘I’ in your paper.” Interestingly, these imperatives were stated, or at least remembered by students, in the negative voice (*no, cannot, don’t*).

As decades of research on teaching writing confirm (e.g., Elbow, 1973; Hillocks, 1986; MacArthur, Graham, & Fitzgerald, 2006; Smagorinsky, 2006; Swartz, 1987; White, 2007; Zinsler, 1988), my study’s participating students also found that these kinds of explicit instructions were not helpful or useful and did not connect learning to their personal, academic, and professional development. As Anita put it, “these expectations don’t communicate writing as a learning opportunity to think about research . . . as a chance to really learn to critically think through a paper. . . . I think there is a more approachable situation to writing the paper, as opposed to telling us what you want.”

Students actually wanted more than explicit expectations of assignment format and writing style. From Anita’s perspective, a more *approachable situation* appeared to mean that she wanted a more (inter)active or engaging discussion with the instructor that could expose deeper learning opportunities of the assignment content and disciplinary conventions. Participating students suggested that helpful classroom discussion should integrate instructor expectations, student writing, and active learning opportunities as a means of thinking. In this case, students revealed that it was most helpful when instructors discussed his or her expectations in the classroom, and then went further to coach the students through an exercise that integrated the instructor’s expectations with assignment content and ideas. Anita explained it this way:

Listening to your tutor and talking with each other about how to write a paper in class [is] conducive to your learning and can compliment one another. My tutor this year said ‘don’t quote exact quotes from the CARNA guidelines’ . . . which is fine, we can do

that . . . But then, she gave you ideas on how to rephrase things . . . so that you could feel like you were saying all you wanted without quoting. I thought that was very very helpful because I don't want my tutor telling me *what* to write about. We know what to expect when we are writing a paper now [that we are in our third year]. I think that, now, our questions are leaning more toward the content aspect . . . and to explain how to write that content is valuable in that it helps you learn, but it also helps to promote thinking.

One reason that Anita (and other students as well) may have found this helpful was because the classroom instructor explained how to write in the conventions of the discipline. The instructor also guided the thinking processes required for academic inquiry in the nursing discipline. The classroom instructor coached students into writing the genre by identifying one distinctive feature of scholarly writing in nursing. A feature that for these students was not previously known to them, or perhaps it was known to them, but they needed a way of (re)discovering, recalling, and (re)communicating meaning that can be explicitly extracted from the topical context of the assignment (and significant to the profession and discipline of nursing; see Reinecker & Stray-Jorgensen, 2003).

Although participating students described the virtues and benefits of classroom discussion and acknowledged its value to learning to write, classroom discussion is not without its pedagogical challenges (Brookfield & Preskill, 2012), constraints (hooks, 1994; Kain, 2003; Weimer, 2013), and contradictions (Elbow, 1986; Devitt, Bawarshi, & Reiff, 2003). Edward articulated this in his own metaphor about learning and learning to write through classroom discussion. He called it “the beauty and also the curse” of “paper writing.” He observed that discussing writing in the classroom “can relieve a lot of anxiety” but it can also “bring out a lot

of frustration and competition” among students. He claimed that there was a “faculty culture” that “infringe[d] upon the student’s individual writing process.” He explained,

There is huge competitiveness in our faculty and I feel that our faculty somehow promotes that in a way. [We are] being curved and trying to learn off each other but yet beat each other out with grades, and with what we are trying to *keep from* but also *share with* each other, well, that gets frustrating when trying to write a paper [student’s emphasis].

Assignment-Focused Dialogue

Assignment-focused dialogue was a critical factor in helping students complete the writing task. It was particularly important to these five students that they talk about the scholarly paper assignment with someone familiar with disciplinary expectations, course content, assignment structure, and marking criteria. Students specifically reported three key individuals who helped them complete their assignment: their instructor, a trusted friend or peer, and a discipline-specific librarian.

Instructor. Participating students said that their classroom instructor is the most important person they want to talk with about their writing. All five nursing students claimed to talk to their instructor about one or more writing concerns. When asked about what they talked to their instructor about, most students mentioned the dreaded APA format and style, grammar, and sources. Two students brought up questions about language use and word choice. Tina recalled having several discussions with her instructor about using the word “issues” in her scholarly paper. Tina claimed she was unsure about using the word correctly in the paper because she was not sure what the term meant and hoped the instructor would elaborate some meaning of the term in context of the scenario. Tina said, “I wanted to know, for instance, were they referring to

issues that occur at work? Or were they referring to the actual steps that you'll use to go through it?" Although Tina framed her concern as wanting to understand the meaning of term in context, she was seeking to understand how language was used and how the word *issues* could or would be interrupted and perceived by a professional nurse when faced with an ethical and legal situation, such as the one posed in this scholarly paper assignment. As Tina later explained, "Depending on the issue, I really wanted to know, is this what [an RN] would do? Is this who [the RN] would speak to? . . . I wanted to know so I could outline my paper by how *I would handle it* professionally, ethically, and legally. . ." [student's emphasis].

The other student, Amber, talked with her instructor about using "I" instead of "the writer" in her paper. Amber preferred to use *I* but she said the instructor preferred *the writer* because, Amber said submissively, "it is more reasonable." When asked why she thought it was important to talk to her instructor about such things as personal/impersonal pronoun expressions in her scholarly paper, she said that previous experience with scholarly papers taught her to "clarify" her "tutor's preferences" before she does anything else.

Interestingly, many first and second year students mentioned a need to identify their tutor's preferences before they began writing. It seemed that if these students had a writing checklist, then *tutor's preferences* would be on that checklist. Students said that they were most likely to inquire about their instructor's preferences regarding APA style, formatting, or mechanics because marks were heavily deducted otherwise. Amber reluctantly conformed even though she did not agree with it. "I realize that the formatting is not as important if the content is valuable," she remarked. "But, I don't like to lose out on marks due to APA formatting. I think it is silly [but], definitely, I make an effort to format my papers the way my tutor prefers."

So, with Amber, now in her third year, I was curious. Why was this third-year student still concerned about APA style as a matter of importance? So, I proposed a hypothetical situation and asked another question. Her answer was surprising. I continued our conversation:

You bring up a consistent concern among your peers. Many of your peers feel, like you, that there is too much focus on APA and not enough on content. I'd like to get your thoughts on why your peers feel this way about writing in nursing. So, let me propose a hypothetical classroom. Let's imagine you and your peers and a nursing tutor are discussing a scholarly paper assignment. Your instructor provides you and your peers an opportunity to ask any question you want about the assignment—*any question at all*.

When given this chance to ask *any question*, your peers ask about the APA formatting for the paper. When you have an opportunity to ask *any question about the paper or assignment*, then why is it that you ask questions about formatting and not content?

Amber thought a moment and made a surprising, unexpected reply, “You know, with the formatting . . . it's safe. [W]e feel safe talking about formatting because it is something that we already know. Sometimes . . . we want [instructors] to tell us more about what we already know.”

This response offers insight to nursing students' perceptions of rules, roles, and what Goffman (2005) called a ritual state of mind in the presence of others. Goffman's original work (1953) studied sociological and behavioural communication strategies in face-to-face interaction, and his most cited work (1959) focused on his thesis that rituals of everyday life affect the public projections of self. He believed there were connections between daily life and theatrical (or *dramaturgical*) performances. According to Goffman, these study students are performing with a *script*. The recurring APA questions of these study students actually function as a script between

actors. Students will invent (and recycle) scripts to determine what role they should play in a given situation. But there is a twist. Students rehearse these scripts in front of others, like their peers and teachers in the classroom. When a student performs the script in front of his or her peers in the classroom, the student is seeking to acquire information and to bring into play information they already possess.

Goffman's thesis (1959; 1986) is that the student conveys the script in two ways, and often with signs and expressions (verbal and non-verbal) that remain obscure. First, there is a tendency for students to offer the group an idealized impression of themselves and the situation; it is an impression that agrees with the accepted (or perceived) values of the discipline. Second, the student will give an impression of agreement with disciplinary standards, even though those standards are inconsistent with the student's idealized version of learning. Because the ritual of the APA questions/preferences is a rehearsed script and a prescriptive performance with learned rewards, consequences, cues, and hints, the performance has a sense of security because the classroom responses are predictable, or *safe*, as Amber described. In my case study, what scholarly paper assignments are intended to do—engage self-directed learners in deep learning—falters in practice. Instead, learners converted scholarly writing assignments into an activity-oriented performance, or what Bain (2004) and Weimer (2013) would call *strategic learning* rather than *deep learning*.

When asked to describe ways in which their instructor helped *connect their assignment to professional development*, the students recalled more personal conversations. It appeared that students wanted to talk about the assignment as a means of building personal rapport with the instructor. Students emphasized that talking with the instructor about the writing assignment, in meaningful and engaging ways, developed an understanding of writing as much as an

understanding of the nursing profession. As Anita shared, “I like talking to my course tutor” because

the course is so short [six weeks], you have such a limited time to speak to [the instructor] and develop a rapport on a personal level. . . . When we get the paper [i.e., the assignment instructions], and she tells me how to write my thought process through this [scenario], I like to think of it as a learning opportunity to adapt my knowledge to the scenario. I mean, I want this paper and I want this [conversation] to be a learning opportunity.

Building rapport with course tutors also fostered students’ enthusiasm and engagement.

Enthusiasm was evident from such statements as, “I think we have the best instructors ever,” and most participating students described their instructors as “super helpful,” “wonderful,” and “friendly.” Students also seemed to recognize their own intellectual development when they talked about their conversations with instructors. Carmen said, “Everything is coming together in third year. . . . Things just flow better. . . . We are a lot more comfortable. . . . We can start focusing on our writing. It becomes less about who gets the best grade and more about the way we learn about ethics.”

A good student-instructor relationship opens up a comfortable space for more learning and obviously creates enthusiasm and engagement among these study students, which can ultimately lead to higher levels of achievement (Wenger, 1998; 2005). But, good student-instructor rapport also, and perhaps more importantly, advances the students’ participation in the community of practice. Nguyen (2007), who conducted a case study of language instruction at the University of Hawaii, proposed specific ways in which student-instructor rapport can and should be built into assignment instruction as a way to “enrich the social practices of the

classroom and increase the dimensions of discourse in the classroom, thus providing more opportunities for language acquisition in context” (p. 298).

Nguyen encourages teachers to think about assignment-specific conversations in ways other than a direct lesson or explicit instruction. For instance, she “promotes the view of the classroom as culture, where teachers and learners co-construct interpersonal relationships while getting their [writing] tasks done” (p. 299). In other words, for the nursing classroom, good student-instructor rapport that builds intellectual development and advances student participation in the community of practice, not only includes conversation *about* nursing, but also *uses* nursing assignments—scholarly papers—to create and maintain an open, comfortable, and social learning environment.

Several participating students claimed to have experienced an open, comfortable learning environment in the classroom. However, students did not always have high quality interaction with his or her instructor. There were often times when a student did not quite know how to ask the right question in front of her class peers. One student felt her “questions were ignored” in a class discussion, and another reported that the instructor’s answer to her question was “a little bit less in depth” than she needed at the moment of inquiry.

Trusted peers and friends. All five students sought peer feedback on their written drafts from a *trusted peer* before handing it in to their instructor. They were adamantly selective about who would read their drafts, and they did not talk about their writing with just *any* friend or peer. As one student put it, “I like having another person read over my paper, but not just any person.” Carmen stated, “[W]hile I think peer feedback is important, I [do] not like having just any peer read my paper.” In fact, Carmen said that out of her group of friends, “only one is a good writer” and that who she trusts to read her writing.

Tina said that she had “only one friend” who she trusted to peer read her paper. Tina explained the reason was not just merely for collaboration or corroboration. Rather, she was protective of her ideas—and her grade. She revealed:

I am not going to give my answers away and let people read my papers before handing them in. [...] If anyone comes [to me] and wants me to look over their paper, I will absolutely look over their paper and give them the best feedback that I can. I want them to get a good mark. I just don't want them to take my idea and get a good mark.

In Amber's case, she turned to her family members as *trusted readers*. She said, “My sister is an excellent writer, and I often have used her to help me write.” She also said her brother-in-law was quite helpful in giving her advice about how to revise her writing, “I had my brother-in-law, who is a teacher, look [this scholarly paper] over. He said, ‘you know if you move some of these concepts there and group some of these here, it might make more sense to the reader.’ So I said, ‘yes, that makes sense.’ So, I made the changes. . . . With his suggestions, I think I turned in a good paper.

Carmen, Tina, and Amber pointed out that they will seek trusted individuals to help them complete the assignment and learn disciplinary discourse. In Wake's (2010) case study of the role of dialogue in student's quest to understand how to write an economics assignment, she contended that students will personalize learning and teaching systems involving complex concepts in the writing assignment task. One way students personalize learning is by talking with each other at their own level of learning. Students will co-construct meaning with other trusted students and peers “in order to produce written texts and so achieve success in their academic studies” (p. 308). Even when peer interaction is not a part of the writing assignment, students will consult with another trusted individual about the assignment.

Students tended to gauge their own level of understanding by exchanging their own interpretations of writing instructions with those of their friends. Sometimes the exchange was as simple as, “This is my understanding of the assignment, what is yours?” or “This is what my instructor said, what did your instructor say?” At other times, students reported needing more time to talk it over with their friends. Tina said that she felt challenged by the scenario and was unsure how to apply it in a scholarly way of writing. She talked about her challenges with a self-selected and established group of trusted friends, “who write on the same level” as she does. When asked what challenges she discussed with her friends, she said that one challenge just snowballed into another challenge. First, she could not picture herself in the situation that the scenario portrayed, but she had to put herself in that position, because the assignment required her to. This in turn, created some anxiety over how she was going to link disciplinary codes of ethics with standards of practice. She felt the assignment was testing her level of understanding of how to put policy into practice. She said that talking with her trusted group of friends a couple of times outside of class enabled her to talk her way into imagining herself as a registered nurse. She explained, “when I imagined myself in this ethical situation, then I could . . . apply what it means to be a nurse in this context [and] talk on the level of how it will be conducive to competencies. She concluded, “[B]y talking through it [with my friends], I was *working* through it and leveling my *own* understanding” (student’s emphasis).

Librarian. Carmen disclosed, “some [students] have their own group of friends and they probably go to them for help and stuff [but] I go to the librarian.” Crosling and Webb’s (2002) collection of case studies on student learning supports emphasized that subject-matter librarians were a rapidly growing and important role in student learning supports. A noticeable pattern between Crosling and Webb’s case studies was that students often turned to librarians for rapport,

trust, confidence and motivation throughout the writing assignment tasks and that students perceived such interactions with librarians as fundamental to their academic success (p. 174).

In my case study, third-year nursing students talked to librarians about the unfamiliar nursing literature required in this writing assignment and asked about ways to integrate that literature in the context of the assignment topic. For instance, this assignment required students to consult a variety of legal and professional documents. Students admitted that they were challenged to find legal documents and supporting literature on the legal and ethical issues presented in the assignment scenario. They asked a health sciences librarian to help them through this step of the writing process. Amber noted, “[I]t was extremely hard to find any literature on abusive nurses [but] librarians will find those papers that you need. . . . [L]ibrarians know these things [and] will teach us how the system works.” That is what her brother told her; he was successful in college because librarians helped him get through his assignments. She remembered him telling her, “If you know what questions to ask, librarians will do a lot to get you through your assignment. Librarians can be your best friend.”

Several nursing education studies indicated that, indeed, librarians do take on considerable responsibility for assignment learning supports, especially familiarizing nursing students with literature search strategies (Barnard, Nash, & O’Brien, 2005; Dee & Stanley, 2005; Wallace, Shorten, Crookes, McGurk, & Brewer, 1999; Yeoh, 2000). However, the nursing students in my study recognized, even in their third year, that they continued to have trouble integrating previously learned strategies with each new assignment task.¹⁵ Students claimed to

¹⁵ This finding is also consistent with Verhey (1999), who found that more than 75% of nursing students reported feeling unsuccessful in seeking appropriate information to write their assignments in their courses, and Bruce and Candy (1995, p.4) who suggested that “one-off demonstration-style information skills classes (e.g. how to use a specific database)” do not necessarily prepare nursing students for the advanced challenges of assignment-specific research and problem solving required in their courses across all four years of their program.

understand basic search strategies, and often referred to their first-year library/information services orientation. “But that was then and this is now,” said one student.

For this third-year scholarly assignment, Carmen also went directly to a health-sciences librarian to get help with “finding literature” but specifically needed assistance with key word searches, refining results, linking (or eliminating) articles, and reading the articles they found. Carmen also admitted that even as a third-year student, she continues to have problems identifying, defining, analyzing, and integrating nursing literature into her own writing (a problem that Amber, Edward, and Tina also talked in their interviews). Carmen described her reading problem in this way:

When I am searching for articles, I am totally just looking at the abstract. If I don't understand the content, then I don't use it. I may have missed out on some really great articles. . . One of our constraints on the paper was you have to eight resources and six of them have to be research articles, and they have to have a method. And some students had trouble with that. It was good in that students had to pick out a research article and why this would be appropriate. But it does take away from the writing because you're trying to make sure you have enough research articles. Then, again, we were never told what to look for in an article or research article. We just make sure we have six.

In general, students said that dialoguing with the librarian about the literature content was one way to relieve their anxiety and trepidation as they attempted to integrate required sources into the writing assignment. Librarians certainly helped Amber relieve her anxieties about writing her scholarly papers. As Amber put it, “We are so overwhelmed. Scholarly writing is a foreign language to us. I love the library. Librarians help me find what I'm interested in. When I talk to librarians, I start making the connections.”

Assignment-Specific Group Writing Tutorials

Writing assignment support was made available for all the students in this course in the form of assignment-specific group writing tutorials. A trained writing tutor from the WAC program organized and taught three sessions, which were specifically created to help nursing students complete this scholarly paper assignment. Only one study student, Amber, participated in these writing tutorials. Edward wanted to attend but had scheduling conflicts; Tina had participated in past years and “never found them useful;” Carmen said she was “just a procrastinator” and preferred writing the paper the night before it was due and Anita never felt the need to use the support.¹⁶

All five students said that they actually preferred to discuss their writing needs with their classroom instructor. However, because the course was six weeks long, students noted limited opportunities in which to speak with the instructor about specific writing aspects of the assignment and any personal writing support needs. Having a WAC writing tutor available to help nursing students in this way and within the context of the assignment topic was important to the students. Although students were motivated to write about this particular assignment topic, the 3-week time frame in which to write the paper was daunting for them. As Anita commented,

We want to know how and why to make an argument [and] we need to know them in the context of nursing and we need to know how to incorporate new information into our thinking for scholarly writing. However, I think this is daunting for us, especially because the course is so short [and] we don't have much time to talk with our tutor about it.

¹⁶ In my writing tutorial experience, a 20% uptake of this kind of writing support is about average for nursing students in their upper years.

The placebo effect and domino effect. Although four out of the five nursing students did not participate in the writing tutorials, they did experience what I call a placebo effect and a domino effect. Meaning, they did not attend any of the tutorials but they *perceived* some sort of positive benefit from the tutorials (placebo effect) or *received* some sort of benefit (domino effect). First, Amber, Anita, Edward, and Tina all claimed that “just knowing they were there and available to us” relieved their writing anxieties. This corroborates with my own writing tutorial teaching experience with nursing students and nursing instructors. Anecdotally, nursing instructors often perceived their students *would write better* when group-writing tutorials were offered as a writing support to help students write the assignment, and students often claimed they *could write better* as a result of tutorials being offered and accessible. I also taught group-writing tutorials in nursing courses where 25% of the students attended tutorials but instructors reported more than 50% of students improved their marks. I recall tutoring one fourth-year course where the instructor perceived that her students *did write better*. About three-quarters of the students came to every session, and after grading the assignment, the instructor followed up with me to let me know that *every student* wrote an excellent report and that they were the best student papers she could remember reading in the many years she had taught that course.

Second, Carmen and Tina both experienced a domino effect with respect to writing tutorials, meaning other students who attended group writing tutorials often shared what they learned with their other classmates who did not attend. Carmen recalled a day when two other classmates came to class and shared what they learned from the WAC writing tutor about forming a thesis in the introduction. She said rather matter-of-factly, “[I]t was helpful. It wasn’t anything overwhelming, but it was good. It was what you would expect out of a writing clinic.”

Tina shared an aha moment. She was unsure about how to write the conclusion for her scholarly essay and she was getting nervous about it because the due date was near. Then, one day, a classmate who attended one of the writing tutorials shared with the class what the writing tutor suggested was appropriate for the conclusion of the paper. The nursing students who attended the writing tutorial relayed the purpose of a conclusion and what to include in the final paragraph. This bit of information came at a perfect time for Tina. She explained, “Before, I always felt conclusions were redundant because I just repeated what I just said; but [my classmate who attended the writing tutorial session] told us suggestions for changing what we could do in the future. I had an aha moment. That’s what helped me write my conclusion.”

Essentially, Tina learned how to write her conclusion for this assignment from a spontaneous peer-teaching moment that extended out of assignment-specific group writing tutorials. A final point to make about the domino effect of writing tutorials is that the tutorials appeared to foster collaboration and sharing among third-year students rather than the competitive mindset that students often claimed to experience. As Tina put it, “[My classmate] really had an advantage over us, but instead she helped us.”

Benefits of attending group writing tutorials. I would like to return for a moment to the one student who attended the writing tutorial sessions. Amber claimed several benefits from attending all three sessions. What she shared reinforced a pattern of learning to write the assignment: listening-thinking-writing. She first pointed out that she benefitted from the variety of questions asked by her peers and by listening carefully to the tutor’s responses and advice. “I was the only one who came to all three,” she recalled. “Everybody was different every time. So, I got a lot of benefit through their questions. . . . I just listened and learned.” When asked to describe what she learned from her attentive listening, she explained that the sessions created a

metacognitive space where she was able to think about her writing over an extended period of time. She emphasized, “I was thinking about my paper all the time. I was thinking about ideas all the time. I kept incorporating ideas. I just kept writing.” Finally, Amber said that when it came time to finish writing her paper, she felt prepared and confident. “The tutorials kept me on track,” she concluded, “When the last week came that we had to write it, I was comfortable; I wasn’t freaking out. I finished it, polished it all up, and it was good.”

Several weeks after this interview, Amber wrote me a brief email. She had received her graded paper from her instructor and wanted to share two meaningful outcomes as a result of attending the group writing tutorial sessions. First, she really believed she was able to contribute something intellectually to this topic and communicate it effectively to her reader. Second, she improved her mark by 14 percentage points from her last scholarly paper. In my reply email, I thanked her for sharing this with me and expressed my encouragement, support, and desire to stay in touch about her writing experiences in nursing. Additionally, I took this opportunity to ask her another question about her writing tutorial experience. I asked if she would share with me *why* she decided to attend the writing tutorial sessions. She replied, “I went to all the writing sessions because I got such a low mark on my last paper. I really needed to figure out what I was doing wrong.”

Her response brings up an important aspect of learning writing assignments in this case study of undergraduate nursing. There is a cultural focus on grades and a rhetorical focus on correctness. Third-year nursing students still believe there is a definitive, correct way to write the scholarly essay. As Tina said, “there are many ways to write a scholarly paper, [but] there is kind of *one* answer” (student’s emphasis). Although this was the students’ fifth scholarly essay—the

fifth time in three years to write this genre—students still misunderstand the rhetorical purposes of this recurring genre and the discourse of writing as a way to learn nursing.

Year 3 Informal Interviews

After I conducted, transcribed, and analyzed the five semi-structured interviews, I conducted three voluntary, informal interviews with third-year nursing students: Alice, Lilly, and Marie. Interviews lasted about 30 minutes each. The purpose was to discuss the preliminary findings from semi-structured interviews and get feedback on my understanding of what the other five participants said about learning to write the scholarly paper assignment. I met with each of them individually in a common meeting space on campus and I did not audio record these informal interviews, so there are no transcriptions. I took notes during each informal interview.

Alice, Lilly, and Marie all agreed with the study participants and the findings that I presented in this chapter. Between Alice, Lilly, and Marie, they recommended four (4) additional things that they felt enabled their learning, writing, and professional development in Year 3: (1) Concurrent or complementary courses; (2) Upcoming preceptorship; (3) Mentoring younger students; and (4) Time management.

Regarding concurrent or complementary courses, political science and philosophy were the courses that helped Marie write this assignment because she was able to integrate what she learned in these courses into the political and ethical situation of the assignment scenario.

Regarding the upcoming preceptorship, Alice was cognizant of her upcoming preceptorship, which is a 10-week placement in the student's area of interest, and Alice was interested in the pediatrics placement. She was motivated to write this scholarly paper because she could connect the topic to her interest in pediatrics and her upcoming "real world" placement.

She was also very motivated to get high marks on this scholarly paper assignment because the number of students accepted into pediatric placements was low and the competition for those spots was high. Having a high GPA increased the probability that Alice would be assigned to a pediatric unit.

Regarding mentoring younger students, Lilly and Marie claimed that best way to learn how to write is to help more junior students with their writing. Both of them were currently participating in the faculty's peer mentoring program and talked about how much they learned from 1st year students' questions about writing assignments, finding literature, integrating sources into the text, APA formatting, organizing content, and so on. In my interviews with Anita and Edward, they made similar comments about volunteering as peer mentors and that one of the best ways to learn to write in nursing was through mentoring younger students.

Regarding time management, Lilly and Alice mentioned that they were less stressed about the scholarly paper assignment in year 3 because they were better able to manage school-life-work obligations. They said that after two years in nursing, they now know the routines of course scheduling, tutorials, and clinical rotations. They are also more aware of the process they each (respectively) go through to complete scholarly paper assignments, the travel time required for commuting to clinical placements, and so on. With those two years under their belts, Lilly and Alice both felt more in control and better equipped to write this scholarly paper assignment.

Year 3 Student Suggestions

Student participants were asked, *If you were to make recommendations for writing supports that you do not currently have but would like to have, what would you suggest?* The students made the following three suggestions for instructors: debrief after the assignment is due,

help with searching and reading research articles, and revise the *General Guidelines for Evaluation of Scholarly Papers*. Here are some of their expanded comments.

Debrief After Assignment Due Date

- **Carmen:** A recommendation from my end would be to talk about [the assignment] post due-date, like a debrief. Maybe in a group setting, we have an extra tutorial class, and your tutor can be there to guide. The expectation is that you come to that group with highlighted areas that you had obvious trouble with, or with comments that are confusing to you. You can also talk with a peer about it, just to get another view about the [instructor's] comment, or how I wrote a section of my paper. In the end, what is it about my writing that my instructors found good and what I can improve on? I may be making the same mistakes over and over again and there is only so much you can get from written comments. I think that this kind of debrief would even be a good thing.
- **Amber:** Writing nursing papers can be confusing because it is something different every time and comments are so confusing. I recommend discussing them afterwards. For instance, [an instructor's comment] will say, ‘good, this shows progressive thinking;’ I don't know what that means. Was it good because I provided an argument for something? Was it good because I provided some of my own input? It's so confusing. Or they will say, ‘we didn't ask you for this in the assignment.’ Well, obviously you wanted me to provide something different, but what was it? What do you want from me? I want to be a good student and try my hardest. But a lot of times I don't feel that I am given the tools. Hopefully, having something like debriefing afterwards would help fix some of these things.

- **Anita:** I think if we had a chance to debrief [our] scholarly paper writing, it would help you *learn* and maximize your knowledge, to maximize what you know, and help clarify what is still confusing to you. Especially if [students] are weaker writers, [debriefing] will help you with your mistakes, and at least understand your thinking and your processing. We all know things, but we need to know them in the context of nursing and we need to know how to incorporate new information. That is how we grow. That is how we learn.
- **Edward:** It would be beneficial, if, after you turned in the assignment, to talk about some of the challenges you found in trying to complete or accomplish the assignment. For instance, if you were given a scenario with an ethical situation, and you needed to find sources regarding this context, but it was challenging to find these articles, then it would be a great idea to discuss what the profession would actually do . . . and how they would go about finding the information that was so difficult for us.

Support for Searching and Reading Nursing Research Articles

- **Tina:** I would recommend more help, on a consistent basis, with searching for articles. When I am searching for articles, I am totally just looking at the abstract. If the content is not applicable to what I need, then I don't use it. I may have missed out on some really great articles. I also think in second year, one of our constraints on the paper was you have to eight resources and six of them had to be research articles, and they had to have a method. I know some students had trouble with that, including me. It was good in that students had to pick out a research article and why this would be appropriate. But when we don't know what we are doing with this, it takes away from the writing because you're trying to make sure you have enough research articles. We

were never told what to look for in an article or research article. We just make sure we have six.

- **Carmen:** Regarding reading, I don't know if I speak on behalf of all third year students. I sometimes have trouble reading academic articles. And to be honest, when I am sometimes reading an academic nursing research article for my paper, if it is a research paper, sometimes, I feel like it is almost too advanced for me. I only read the abstract, the introduction, and the conclusion, and sometimes the results. Sometimes I don't get the wording that they use or I just don't get any of it. So, I just go to the abstract. That's it. I don't have the time to read all of it, and I often don't understand all of it. [*nervous laughter.*]
- **Edward:** With this searching and reading nursing research articles: I feel they should have done a better job in the nursing research course itself. I felt like they were just trying to get us to do it repetition wise. I don't feel like I learned from that [course]. I wanted more examples and to see how *this* is and how *that* is. [...] to break it down, distinguish its parts, and make it relevant for us. . . . It would also be beneficial to teach us how to distinguish a theoretical article from an empirical article.

Revise General Scoring Guide

- **Edward:** I would recommend changing the scoring guide, because it is too broad to have consistent marking between papers. Each paper is different. By third year, we know that what's important is the instructor's expectations. They all have their own preferences, their own wants and differences. There is no standard for marking. They all mark according to how they want. The general scoring guide sends a conflicting message: that there is consistent marking between papers but there isn't. It's

subjective. I think it creates a barrier between students and instructors. It adds to the politics between us.

- **Carmen:** I would recommend changing the scoring guide. Honestly, I do not look at the scoring guide any more. This is a waste of time. It is too broad.
- **Amber:** I would suggest giving us rubrics that are specific to our assignment. And to have the rubrics emphasize the concepts in the assignment. Get away from marking us on APA.

Year 3 Students Reflect on Learning to Write Years 1 and 2

Towards the end of each interview, participating students were asked if they could briefly reflect on learning to write in their first and second undergraduate years of nursing. By doing so, the researcher intended to gain insight into third year students' perceptions of learning to write as they developed across three years of this baccalaureate nursing degree program. At best, the researcher could gain some insight into how Year 3 students could articulate their learning/learning-to-write experiences. Most replies were not very articulate. More often than not, replies were accompanied by laughter, smirks, and a little embarrassment. As students recalled those early years of learning to write their assignments in nursing, I noticed an obvious change in their voice tone, body language, and facial expressions. Students had a jovial heir about themselves, half mixed with shyness, humility, and pride, realizing how far they have come over two years. It was as if they were developing a sense of belonging. They felt more comfortable. Things flowed better now and they could focus more on writing. Carmen summed it up best:

I think with first and second year, it is a little bit spastic. You have so much to think about, and you don't understand what CBL [context-based learning] is; you write these papers and you still don't understand [because] writing is not what you are thinking

about; writing is pretty much on the back burner. Now that we are getting into third year, we are a lot more comfortable with how the flow of the class is. Everything is coming together in third year. Things just flow better.

Year 3 Closing Remarks

This chapter discussed what third-year nursing students said about learning to write the scholarly paper and how it fostered their professional development. Important to their development was assignment design, classroom discussion, assignment-focused discussion with trusted individuals, and group-writing tutorial supports.

Learning to write their fifth scholarly paper was considerably enabled by assignment instructions with a concise writing prompt, challenging problem scenario, new set of professional literature, and content-based marking left open to negotiation between student peers and instructors. Classroom discussions initiated a pre-writing process that included thinking more deeply about an complicated scenario and listening more carefully to both the instructor's and other peer's perspectives on a politically delicate situation. Third-year students also discussed the assignment outside of the classroom with trusted friends, librarians, and other registered nurses in the workplace. Friends were a common source of verbal and written feedback, especially during the drafting stages, and nursing student peers were the most trusted for feedback because they understood the disciplinary culture of assessment criteria and scholarly writing expectations.

Learning to write was also enabled by two vital learning supports: subject-matter librarians and group-writing tutors. Subject-matter librarians helped students with sources and nursing literature. Students trusted librarians, and by third year, usually had an established acquaintance with one or two librarians in the university's health sciences library. Students sought out librarians for help with anything online and most commonly to assist students with

finding research-specific, content-based sources using the required medical database(s), navigating a breadth of nursing literature, and narrowing subject matter with keyword searches. Sometimes, students asked subject-matter librarians to help them read browser-based findings, interpret the search results, and in some cases, how to read the nursing literature itself.

Assignment-specific peer-group writing tutorials were not well attended by third-year nursing students in general. However, for those students who did not attend writing tutorials, there were at least three benefits. First, students claimed that just knowing the writing support was available relieved their writing anxieties. Second, students actually perceived that they could and would write better just knowing peer-writing tutorials sessions were accessible. Third, students who attended tutorials tended to share what they learned from the writing tutor with other classmates or friends who did not attend, passing on how they learned to write such things like writing a more concise conclusion for the scholarly paper.

The only participating student who attended group-writing tutorials reported an improvement in integrating ideas and incorporating sources into her writing. She attended all three sessions and brought a draft with her for each session. She learned more than just writing. She learned how to actively listen to the writing tutor's advice and revise accordingly throughout a three-week writing process. As a result, she had well-polished final paper to hand in. By the end of the tutorial sessions, she was more confident as a writer, who just one semester earlier completely lost her confidence because of demoralizing feedback and a very low grade on the last scholarly paper.

Overall, the implicit challenge for third-year students was a domineering cultural focus on grades and a definitively rhetorical focus on correctness. Third-year nursing students still believed there was one and only one correct way to write the scholarly essay. They continued to

misunderstand that the curricular purposes of this recurring genre were a way to learn evidence-based nursing and develop intellectually as a evidence-based nurse practitioner.

Year 3 Summary of Findings

This chapter presented responses from individual semi-structured interviews with five students and three informal interviews with three other students, all of whom talked about their experiences of learning to write the scholarly paper assignment from one third-year nursing tutorial course. Student responses focused on what connected their learning to professional development. The main findings were:

1. Assignment design was straightforward. Students found the following features helpful to learning to write the assignment: a short, problem-based scenario, a clear and concise writing prompt, and a well-structured layout of instructions. As a result, the benefit of straightforward assignment design to students' writing/professional development was performing higher levels of thinking and competency-based practice, grappling with moral/ethical/legal nursing dilemmas, analyzing personal/professional assumptions, examining political aspects and regulatory constraints, and prioritizing how all of them would affect nursing care and workplace relationships. Students revealed that:
 - a. Instructions were noticeably different than previous years. Assignment details were not over detailed and fit on less than one page. The structure of the prompt included a problematic scenario with a defined context and concisely worded writing task. These enabled students to get started, focus their thinking on a complicated nursing situation, and engage in problem solving approaches to a legal and ethical problem;
 - b. The topic challenged students to think intellectually. Students were challenged to put themselves in a practical, real-world nursing situation, take on role of a registered

- nurse, make hard choices, and consider the political, legal, ethical, and regulatory ramifications of nursing choices. The topic provided students with the opportunity to articulate a difficult and sensitive nursing situation in a political and legal context and communicate it in a very academic way; and
- c. Reading legal documents/regulatory policies and finding legal/professional sources online was a challenge. However, in the context of the assignment design and scenario topic, students welcomed the challenge. Legal documents and professional regulatory policies were difficult to read. However, that did not deter these students. The challenge provided opportunities for students to collaborate with peers and seek advice from their instructor, another trusted individual, or a librarian. In other words, to socially connect with key individual in their learning environment.
2. Classroom discussion enabled students to collaborate with peers, set group norms about appropriate responses to the given assignment scenario, and clarify (or negotiate) marking criteria with the instructor. Because of the small-size class size (8 to 12 students), students created an opportunistic, pre-writing environment where they bounced ideas back and forth, listened to multiple perspectives concerning the assignment scenario, and established personal and professional confidence to write the content for the scholarly paper assignment. Transparency of the instructor's marking expectations was a critical component to classroom discussion, to the broader context-based and self-directed learning pedagogies, and to students' individual writing/professional development. Explicit expectations were:
 - a. It was helpful when the instructor explained his or her writing/marketing expectations to the whole class and then went further to coach the students through an exercise that integrated the instructor's expectations with assignment content, topic, and sources.

- For instance, one instructor exposed students to one distinctive feature of scholarly writing and explained how to write that feature in the conventions of the discipline. Coaching students' writing/professional development in this way guided students' thinking, exploring, and writing about unfamiliar content and provided students a safe, trusting learning environment (i.e., low-risk, non-risk, no assessment, permits mistakes) to practice communicating content with professional nursing language, or better yet, practicing how to communicate like a professional registered nurse; and
- b. It was problematic when the instructor focused too much on citation style, referencing, mechanics, grammar, formatting, and style. After three years in nursing education, students did not want assessment/classroom discussion to focus on these things. When it did, then students interpreted the classroom discussion as teacher-centered, meaning the instructor just merely told them what to do or how to write. The detriment to writing/professional development (at a Year 3 level) was that it stunted intellectual growth; grammar-based or style-based writing concerns did not communicate to students that writing was a learning opportunity to think about research and evidence-based practice. It also stifled student-instructor rapport; the instructor did not authentically demonstrate any modicum of good faith in achieving deeper thinking and writing skills.
3. Assignment-focused dialogue with trusted individuals was a critical factor in helping students complete the scholarly paper assignment. It was particularly important to talk with someone who is familiar with the disciplinary expectations, course content, and assessment structure. Students trusted three key individuals to help them write the scholarly paper assignment:

- a. The instructor was the most important and trusted individual for two reasons:
 - i. The instructor was a professional registered nurse. Students believed that the instructor would have the deepest knowledge about how to handle a professional, ethical, legal, and politically sensitive nursing workplace situation. As such, students wanted to hear their tutor's stories and build rapport with them. Developing a rapport through personal stories made the students more comfortable and when they felt more comfortable, they were more willing to advance their own participation in the community of practice. Building rapport with course tutors was the single most esteemed connection to professional development; and
 - ii. The instructor was the reader/marker of the assignment and final assessor of the student's course grade. Students were always cognizant to inquire about *tutor preferences* before starting to write the assignment. It was a disliked ritual by students, especially upper-level students, because they felt they were now beyond the APA-dialogue and preferred to focus on content. The surprise finding was that sometimes students encouraged this level of APA-dialogue with their instructors because it was safe. Students felt safe talking about the things that they already knew how to do;
- b. Students trusted friends in the nursing profession and nursing student peers for verbal and written feedback. Every student had a drafting process and sought feedback from a trusted peer or a friend who was a nurse. Friends and peers were conveniently available to discuss ideas, content, standards of practice, and legitimate regulatory guidelines of the nursing profession. Students sought writing advice and feedback

- mostly from peers because peers were more available than a nursing friend who worked long nursing shifts or the instructor who had an intense teaching load. The benefit to students' professional development came indirectly by way of personalizing learning. Students personalized learning by talking with trusted individuals in order to co-construct meaning and achieve academic success; and
- c. Students trusted librarians to help them with two key academic tasks: finding nursing literature online and reading nursing research articles. Nursing research articles were often very difficult for students to read. Students were very comfortable talking with librarians about their own online literacy deficiencies. Students struggled with the online database search tools in the following ways:
 - i. They struggled with appropriate key words to enter into the search bar to help them find the kind of material they were hoping for;
 - ii. They struggled with interpreting the search results;
 - iii. They didn't know how to prioritize the search results in the context of their needs or how to narrow down finding results to something manageable in the short time frame that they had to work in; and
 - iv. A surprise finding was that nursing students admitted they did not know how to effectively read nursing journal research articles once they found them online. Librarians were an effective learning support for nursing students because students said they were very comfortable asking a librarian to help them read the research articles.
 4. Assignment-specific group writing tutorials were made available for all participating students in the form of assignment-specific peer-group writing tutorials. A trained writing tutor from

the WAC program organized and taught three sessions to help nursing students complete this scholarly paper assignment. Students revealed that:

- a. Assignment-specific group writing tutorials were important to students, even if they never used the support, for three reasons:
 - i. Just knowing an assignment-specific writing tutor was available and accessible reduced students' anxiety about writing the assignment. The service was there when and if any student was in need or distress;
 - ii. The tutorials created a positive social environment, where students who didn't use the group writing tutorial services supported their peers who did use it; and
 - iii. Those who attended group writing tutorials tended to share what they learned from the writing tutor with their friends and classmates (a domino effect). This fostered collaboration and sharing rather than the competitive mindset often experienced by nursing students;
- b. The biggest deterrent to students attending group writing tutorials is that the instructor was not involved in the writing tutorial sessions. Students were more inclined to attend writing tutorials that were co-taught by the course instructor and the writing tutor; and
- c. There was one student who maximized the support by attending all three sessions taught by the writing tutor. Three meaningful outcomes benefited her writing/professional development:

- i. She gained a meta-cognitive awareness of writing as a process of thinking. She was able to talk about and develop her ideas, write drafts, and revise her writing with a trained writing tutor over an extended period of time;
 - ii. She felt prepared and confident. By the third week, she had spent enough time thinking how to organize her writing, she was comfortable with the content, and prepared to write her final draft. As a result, she also believed that she contributed something intellectually to the topic and communicated it effectively to her reader; and
 - iii. She improved her assignment grade by 14 percentage points. The last scholarly paper received a very low mark with feedback that not only hurt her feelings but also hindered her desire to write and engage with nursing scholarship. Fortunately, the writing tutor and peer-group structure helped her regain her confidence in herself as a writer and a student nurse.
5. Informal endorsement interviews revealed four more enablers that connected students' learning to professional development:
 - a. Concurrent and complementary courses, such as political science and philosophy courses, helped students to form and articulate their arguments/positions on an abusive nursing situation using political and moral/ethical perspectives;
 - b. The preceptorship, which was a 10-week nursing placement in the student's specialty area of interest, motivated students to write their scholarly papers well. Students were keen to connect the topic to their area of interest (e.g., pediatrics) and to use the scholarly paper assignment as an opportunity to demonstrate their qualifications for placement training in that specialty;

- c. Mentoring and teaching younger students was the best way to learn how to write. Third-year students who volunteered as mentors for first- and second-year students always ended up teaching students how to write scholarly papers because they are central to student learning in tutorial nursing courses. Mentors learned more about their own writing simply by teaching younger students how to write critical components of the scholarly paper, such as integrating nursing research and standards of practice, as well as organizing the structure of the paper and citing references in APA style; and
 - d. Students managed their time much better in third year than in previous years. After two years in nursing education, they knew the routines, demands, and expectations of scholarly writing. Students were more in control of course scheduling and felt better equipped to write the scholarly paper because they had better time management skills.
6. Other findings and student suggestions for teaching/learning how to write the scholarly paper genre:
- a. Debrief after the assignment. Talking about assignment content, feedback, and/or writer-specific composition needs after the due date may help students improve their understanding of disciplinary expectations of scholarly writing. Most important to students was using a debrief session to understand written comments;
 - b. Supplement written feedback with oral feedback or replace written feedback with oral or video feedback. Students really struggled to understand written feedback because usually written feedback was vague, flowery with emoticons, or too incomprehensible to be effective. Students wanted to know what it was that instructors found good about the students' writing or what needed work and why;

- c. Provide reading supports. Students had difficulty reading genres they had never seen before, especially genres with sophisticated, technical, legal, and professional jargon such as: academic nursing journals, primary research articles, legal documents, standards of practice publications, and regulatory policies. Students stated that these were like reading in a foreign language;
- d. Provide technical supports (for students and instructors). Students experienced digital literacy problems in using and navigating compulsory online technology and learning tools, such as database search engines and the university learning management system, eClass. Students also expressed these online technologies were difficult for their instructors, and when the instructor did not use the tools effectively, the students did not either; and
- e. Revise or remove the scholarly paper general scoring guide. Consider creating assignment-specific marking rubrics. If possible, allow more input from students in upper-level years. Online rubric supports (e.g. iRubrics at rcampus.com) can assist tutors and students with co-creating marking criteria.

Chapter 6

“It Throws You for a Loop:” Learning to Write the Scholarly Assignment in Year 4

Year 4 Assignment Description

The fourth year writing assignment was titled *Scholarly Assignment*. This assignment had three components: group presentation, group scholarly paper, and individual reflection. Figures 11 and 12 show the assignment overview from the course outline, which stated the assignment name, mark value, late penalty, “general aspects to consider,” and that assignment details were “accessible on e-class [sic].” Figures 13 through 15 show all three pages of the assignment details, which were posted on eClass. There were also “General Guidelines for Evaluation of Scholarly Assignments” (in the course outline; Appendix Q) and a two-page marking guide created by the instructor (posted on eClass; Appendix R). All assignment descriptions and evaluation/marketing guidelines in this chapter are used by permission of the case study Faculty.

Figure 11

Year 4 Scholarly Paper Assignment Description from Course Outline (page 1 of 2)

10

3. Facilitate the development of evaluation abilities.

- Draw names at the beginning of each scenario of a colleague to evaluate for the duration of that scenario discussion. Observe that colleague during tutorial discussions, and provide verbal feedback during tutorial at the end of the learning package.

4. Your NURS [REDACTED] tutor will:

- Spend time with each tutorial group each day.
- Promote critical thinking.
- Participate in the regular group and peer evaluation sessions when time permits.

GUIDELINES FOR CBL LAB PERFORMANCE

If a student cannot successfully demonstrate an understanding of the theory and an ability to perform a skill, the student will be required to book an appointment at a time convenient to the lab tutor to perform a return demonstration. Students must demonstrate to their lab tutors that they are able to perform the NURS [REDACTED] lab skills. **Students must pass the lab skill component of the course in order to pass NURS [REDACTED].**

DETAILS ABOUT NURSING [REDACTED] ASSIGNMENTS

TUTORIAL/LABORATORY PERFORMANCE (Pass/Fail)

To pass this course a student must obtain **Pass** in for both tutorial performance and laboratory performance.

Assessing tutorial performance:

- We ask you to write two learning objectives for NURS [REDACTED] related to course objectives. The Tutorial and Laboratory Performance Guide and the Course Objectives should help you write your objectives. Your tutor will read these objectives and will provide feedback.

Refer to course timetable. Please submit a document indicating the extent to which you met your objectives. Ideally you should meet all your objectives. However, it is possible that at times a student may not meet all of her/his objectives. If this is the case, justification must be provided to explain why they could not be met. The submitted document should not exceed one page. Only a few sentences commenting on each objective are desired and sufficient. Your tutor will evaluate this document and assign a mark of Pass or Fail.

Assessing laboratory performance:

- Performance is evaluated by your lab tutor using the LAG. This component is also on a Pass/Fail basis.

SCHOLARLY ASSIGNMENT (45%)

Details about the scholarly assignment will be accessible on e-class.

General Aspects to consider when working on the scholarly assignment:

The following points will be considered when tutors are marking the paper:

- Terms are defined and issue is clearly identified
- Contextual elements are clearly explained and supported with relevant examples.

NURS [REDACTED] Course Outline [REDACTED] [REDACTED]

Figure 12

Year 4 Scholarly Paper Assignment Description from Course Outline (Page 2 of 2)

11

- Integration of current research is consistent and appropriate.
- Understanding and critical thinking are evident throughout the assignment/presentation.
- The assignment includes the necessary components, shows clear expression of ideas, and demonstrates consistency in writing style as well as appropriate use of APA format.
- The introduction and conclusion are well developed and complete.
- Ideas are presented in a logical fashion.
- References are appropriate and well integrated throughout the assignment.

If assignments are not received by the specified date and time, a 10% mark reduction per calendar date will be applied.

TUTORIAL and LABORATORY EXAMINATION

Duration of this examination 2.5 hours.

The tutorial section of the exam is worth 35% and will consist of multiple-choice questions. Content from Fixed Resource Sessions will be included.

The laboratory section of the exam is worth 20% and will consist of multiple-choice and short-answer questions. Examples of typical questions will be posted on e-class as well as some general guidelines about the examination.

NURS [REDACTED] Course Outline [REDACTED] [REDACTED]

Figure 13

Year 4 Scholarly Paper Assignment Details (page 1 of 3)

1

Faculty of Nursing
Nursing [REDACTED]

Scholarly Assignment: The Review Class

Successful completion of Nursing [REDACTED] includes achievement of the following objectives/goals:

- Demonstrate, independently, the processes of self-directed learning, critical thinking, and group process skills in utilizing context-based learning, in all learning activities.
- Demonstrate knowledge and understanding of the client as individuals, families, groups, aggregates, community and population.
- Demonstrate knowledge and understanding of leadership skills in nursing and in the context of interdisciplinary teams.
- Demonstrate understanding of the difference between multidisciplinary and interdisciplinary collaboration
- Integrate the knowledge generated from working through the course scenarios, and be able to apply this knowledge to other situations.
- Integrate the knowledge and skills acquired in all learning environments and be able to apply them in other situations (NURS [REDACTED])

Additionally, year four students are expected to critically evaluate knowledge from nursing and related disciplines in situations of acute, complex, and rapidly changing variations of health. Critical evaluation requires the cognitive ability to appraise, compare, contrast, conclude, interpret, justify, and judge the adequacy, logical consistency, and value of information by the application of internal and external criteria. (*Writing Across the Curriculum, Yr 4 Collaborative Administrative Document*)

To demonstrate your ability in attaining these goals and expectations the following scholarly assignment will be completed:

In groups of 3 (with the exception of one group of 2), research, plan and present **a content review class** that expounds NURS [REDACTED] required content from the learning packages: Healthy Workplace, Disaster (Pine Lake Tornado) Correctional (Inmates), and International Health

This assignment speaks to a number of areas congruent with context based learning and critical thinking at a 'year four level', including:

- Group work and positive relational interaction
- Nursing and multidisciplinary literature analysis

Figure 14

Year 4 Scholarly Paper Assignment Details (page 2 of 3)

2

- Scholarly writing (across the curriculum)
- Professional confidence in presentation of academic material
- Drawing on individual strengths and learning/teaching styles
- Leadership; including decision making, conflict resolution, power/coalition, styles
- Creativity
- 'Anti-plagiarism'

This assignment entails a high degree of independence, accountability, responsibility, group work, collaboration and time management. I hope you enjoy the process!

Figure 15

Year 4 Scholarly Paper Assignment Details (page 3 of 3)

This assignment has 3 basic components:

- **Plan, organize and present a content review class to your peers.** Conduct a literature search and analyze for determination of content, plan delivery format and presentation of this theory material to your peers

With ongoing communication with your tutor, in groups of 3 (2 in one case), organize and prioritize content of a NURS () learning package scenario into a teaching presentation, as a review class to your peers.

Presentations are expected to be interactive and engaging. Suggestions include workshops, demonstrations, power point, role play, guided discussions, posters, videos, questioning, and brochures.....be creative!

Each group will have approximately 40 minutes to present their scenario content. The larger section group will determine how the 3 hour review class will proceed.

Content will be appropriately referenced in APA style and submitted to your tutor as a reference page.

Using familiar tutorial guidelines and group process - brainstorming, the use of the learning goals, the trigger questions and the concept map supplied in the learning packages - and support from your course tutor will ensure content is comprehensive.

- **Write a scholarly paper together and submit to your tutor**

With the guidance of your tutor, in your group determine priority content and write a scholarly paper on the topic of the learning package you are presenting. For example – a paper on Disaster Nursing, Prison/Correctional Nursing, International Nursing and Leadership in Nursing. This submission will be in APA style as per the Faculty of Nursing policy for scholarly submissions. Your group determines the length and content of the paper based on decisions you make about priority content.

(Suggestion: more than 2 pages, less than 11! Exclusive of title page, reference page and any appendices)

- **Reflect, reflect, and reflect!**

Reflect on your experience with the project/assignment. You may choose to write this reflection or present it verbally at an interview with your tutor. Due dates are flexible for this component as discussed in class. Whether written or verbal it will be in a professional and scholarly fashion. Questions to consider include: What did you take away from the assignment, What went well, What didn't go so well, What would you do differently if given the opportunity, What did you learn from the change in scholarly assignment as compared to an individually written paper?, Did you experience professional and personal growth? What does the literature say? Please also include peer evaluation as a component of your submission.

Overall, there was no stated purpose in the course outline, the assignment details, or the marking guide, and there was no *component-specific* marking rubric or scoring guide given to the students. Although not explicitly stated in the written instructions, the scholarly assignment due date was discussed in class because each component had a different due date and the instructor wanted the “content review class” presentations to be scheduled and organized by the students. The due date was in five to six weeks time (depending on the date the students were scheduled to give their presentation), the audience for the scholarly paper and the marker was the student’s instructor, and the students were given opportunity to receive in-process feedback from the instructor before each component was due.

The assignment’s only prompt (in blue-colored text at bottom of page 1 of the assignment details [Figure 13]) stated: “In groups of 3 (with exception of one group of 2), research, plan, and present a *content review class* that expounds [course] required content from the learning packages: Healthy Workplace, Disaster (Pine Lake Tornado), Correctional (Inmates), and International Health” [emphasis in original].

Year 4 Participants

There were seven (7) fourth-year participants who responded to the call for volunteers. The six students were Gwen, Lisa, Michelle, Mikki, Linda, and Andrew and the one instructor was Donna. For the purposes of this case study, which was exploratory in nature, my doctoral advisory committee and I agreed not to collect personal or demographic information such as age, ethnicity, GPA, academic standing, teaching tenure, or the like, so that I could focus on exploring interactional aspects that enabled/constrained how students learned to write this assignment. Therefore, no descriptive information about participants is provided in this thesis. Therefore, no descriptive information about participants is provided in this thesis.

The students and instructor were not asked why they participated in the study but all of them openly expressed a desire to improve communication, especially in the classroom where assignments are given, discussed, and negotiated by students and tutors. By sharing their current experiences of learning and writing this recurring genre, students hoped their participation in this study would help instructors and faculty administrators understand the student perspective of learning scholarly writing not just in year four, but across *all four years* of their nursing baccalaureate collaborative program. The participating instructor expressed a desire to share her cumulative experience of teaching fourth year students in a program designed for self-directed learning. She hoped that by sharing her experience(s) of teaching scholarly assignments in nursing education we might gain insight into the “labor intensive and financially intensive” learning and writing needs of nursing students who will shortly graduate.

Year 4 Data Analysis

Year 1, Year 2, and Year 3 interviews began by asking: *What was your experience of writing the [genre name] in [name of course]?* However, the researcher adapted this question more appropriately to the structure of the Year 4 scholarly assignment. Year 4 interviews began by asking: *What was your experience of teaching/learning multiple components of a scholarly assignment, the group presentation, group writing, and individual reflection?* Before the interviews ended, the researcher asked the participants a reflective question: *Looking back, how do you think students learn with writing across the curriculum?* These were the questions that guided the Year 4 data analysis stage, and helped identify categorical themes of teaching/learning to write the scholarly assignment and its components.

Interviews with all seven participants were transcribed verbatim and read three times each by the researcher. Before coding began, the transcripts were emailed to participants for

review and approval. After participant approval was received, I followed the same procedures for data analysis as those described in Chapter 3. Likewise, Year 4 findings were triangulated through informant-validation and formal consultations with an interdisciplinary committee of specialists from nursing, education, and writing studies and discussed with my doctoral co-supervisors to ensure that both the data collection and interpretation were appropriate and within the study's proposed objectives. Discussion included an awareness of evolving patterns/themes in this dataset (year 4) that differed from the patterns/themes in previous datasets (years 1, 2, and 3). Finally, all seven fourth-year participants were asked to review a brief summary of findings and invited to add further comments, thoughts, and/or ideas. There were no additional comments.

Year 4 Findings

One major categorical theme that emerged from the interviews with the participating nursing students and the instructor was that the instructor expressed her own set of expectations and the students expressed their own set of expectations. The instructor and student expectations often appeared to be embedded with personal beliefs, convictions, and presumptions about such things as the context-based learning (CBL) instructional methods, the scholarly assignment design, and the Faculty's learning environment in general. The following sections will first discuss instructor's expectation regarding students learning to write the multiple components of this fourth-year scholarly assignment and then the students' expectations.

Instructor's Expectations

When Donna was asked about teaching the multiple components of the scholarly assignment, she explained the curricular context and importance of self-directed learning and stated that she was "a huge fan of context-based learning" (CBL). Donna emphasized that the CBL curriculum was designed so that students developed their independent, critical thinking

skills through writing assignments. Her expectation (of herself) was to help students understand “what scholarly work is” and how to “prioritize the content.”

However, as the hour-long interview continued, Donna repeatedly began her statements with, “I expect,” “I want,” or “I prefer” and disclosed a number of expectations regarding writing the scholarly assignment (Table 3).

Table 3

What the Instructor Said About Teaching the Year 4 Scholarly Assignment

I expect fourth year students to:	<ul style="list-style-type: none"> • read the literature and analyze and synthesize pieces of what other people say and what their conclusions are • defend [their] conclusions with the literature • determine what scholarly is; they are fourth year and getting a degree from a very prestigious university • reflect back on how to write a paper or how to teach a class • set high expectations for themselves; sometimes they do and sometimes they don't • meet previous goals in other courses and, in this course, I need to challenge them again; they need new goals have a higher order of thinking in fourth year • be able to figure the language out for themselves
I want fourth year students to:	<ul style="list-style-type: none"> • just ‘get it’ • understand what scholarly work is • see what the literature says about [nursing care] • build their knowledge and critical thinking • make decisions and use leadership skills • have higher orders of thinking • know that I want to know what they think • teach their peers • understand the principals of teaching and learning • have a bigger sense of patient care • gain confidence in presentations and public speaking • be reflective practitioners for the rest of their careers • talk about the joy of teaching and the joy of presenting and about some professional [and] personal growth • contribute to the care of society and communities all the way up to global impact • manage conflict in group work

I prefer:	<ul style="list-style-type: none"> • not to tell students what my expectations are • to have one-on-one conversations in terms of content interaction and engagement with students • part of my teaching and facilitating to [guide] students' understanding that nurses are part of a team and not what nurses have been in the past
I thought students would:	<ul style="list-style-type: none"> • want to write something different in their last year • get more out of an assignment with multiple components (but they just saw it as 'more work') • take the ball and run with it

Table 3 illustrates what I call expectation overflow. There are 28 different expectations listed here. As Donna continued to talk about her experience of teaching, her expectations just kept flowing to the point of overflowing and, sometimes, contradicting or competing with one another. For instance, Donna emphasized that she expected students to “figure the language out for themselves” yet she didn’t want students to just go off on their own. She made it clear that she wanted to engage with students on this level and preferred to have “one-on-one conversations” about learning new nursing language and content.

Regarding the content, Donna claimed that she wanted students to “just get it” and “preferred not to tell students” her expectations about content yet she was disappointed when students lacked “confidence” in presentations and public speaking, “joy” in personal growth, and a “bigger sense of patient care.” Donna acknowledged that she expected students to determine for themselves “what scholarly is” yet she reported that she deliberately designed the assignment so that she could “assist . . . facilitate . . . and guide students’ scholarly knowledge.” When it came to teaching the scholarly assignment, it appeared that Donna had expectation overflow; she had too many expectations, intentions, and assumptions about student writing and how students learned *scholarly* writing. More importantly, she revealed a *personal discourse* of nursing education, especially regarding how she personally engages CBL frameworks (of self-directed learning) through scholarly writing assignments.

The only time in our interview that Donna spoke on behalf of her teaching team was when she said, “*we expect* [emphasis added] confidence and competence. *We want* [emphasis added] students to graduate confident, competent, knowledgeable, and [as] practitioners in the process of becoming an expert.” Here, she was authentically representing the professional discourse of her discipline. Then she continued,

When students get the assignment, they [ask] questions. They want to know how many pages; they want to know how to split up the group work for presentations; they want to know how many references they need. Well, that frustrates me. This is not important. They are graduating . . . and my thoughts are that I want *them* to set out specific guidelines. I don’t set guidelines like these, and that drives them crazy.

This part of Donna’s interview was important because it captured the web of *we, they, and me*. Here, her collective discourse (of the faculty and students) was heavily entangled with a personal discourse of wants and desires. Only the most observant or skilled linguist could untangle Donna’s cornucopia of expectations for writing this assignment; the average nursing student could not do it. Donna intermingled her personal, academic, disciplinary, and professional perspectives. When she discussed the assignment with her students, she unknowingly spoke with many voices and mixed messages.

Constraint to Instructor’s Teaching

(Mis)Perceptions of learning. Five of the six participating students said they found their instructor’s writing assignment expectations confusing, explanations contradictory, and directions lacking. From Andrew’s perspective, Donna was teaching with “mixed messages,” which Andrew said, “Throws you for a loop.” An example that Andrew recalled was what he called “you decide but I’ll decide for you.” Andrew said that Donna asked the students to decide

on small groups of three, so he and two other friends formed a group, but then “out of the blue” Donna decided to change the members of Andrew’s small group. He explained,

In the beginning, [Donna] wanted us to choose our small groups. I knew the two other people that I wanted to be with in my group because we were friends. It’s detrimental, you know, to be in a group with people you don’t know . . . and my friends and I knew what scenario we were going to work on for our group project. . . . But in the process, out of left field, [Donna] traded us to other groups. One of my friends ended up going to another group with people he didn’t even know; at least I knew one of the people in my group because I had that person in a class last year. The point is, why does [Donna] do that? She tells us, ‘you decide,’ but then, out of the blue, mid-process, she decides? It throws you for a loop.

The mixed message that Gwen received was when Donna told the class that it would be an option to do the scholarly assignment individually (rather than in groups), but then on the following day, Gwen said, “she told us, ‘we are fourth year students [and] we will need to work in teams [as professional nurses], so we should learn to work in groups to learn *group think*’” [Gwen’s emphasis]. Gwen appeared surprised that Donna then “made the decision” that everyone would work in small groups or everyone would work individually and proposed that the students vote on it. Gwen was one of only a few students who voted to work individually, and, in her words, “I was shot down.” More than that, Gwen said that after she felt shot down, she “was afraid” to negotiate it further and let Donna know that she really wanted to work individually. “After all,” Gwen reasoned,

the past three or four years in nursing, I have always written papers by myself. That is always how it has been. I have developed my strategies and skills over the years to write a scholarly paper. Why would I want to change that?"

Gwen apparently developed a habit of mind (CWPA, NCTE, & NWP, 2011) that Donna proactively challenged. Gwen was not only threatened by the "sudden change" in how she would approach her scholarly writing, she felt rejected by her peers as a result of the "voting process," and developed an instant distrust of a teacher "who g[ave] an option without an option unless everyone want[ed] it." Gwen met privately with Donna. Gwen expressed her desire to work individually, but that "[Donna] resisted my idea, and said that the whole class ha[d] to agree with my idea [to work individually]. Gwen resigned from negotiating any further, "I knew the others would not want to do that—they don't like to study that much—and I don't want to feel like the outsider, so I just did what [Donna] wanted."

Similar to Gwen, Michelle felt somewhat powerless and resigned to "doing what [Donna] wanted." After four years, Michelle was well rehearsed in classroom discussion and well versed in negotiating assignment expectations. She had plenty of practice of "how it works" in the classroom. Meaning, she knew the routine for negotiating expectations of her classroom tutor. However, Michelle really felt that "the discussion about choice" turned out to be a "choice that wasn't a choice." Michelle said, "It seemed like Donna was saying that she wanted us to decide on the group work but she was really like wanting us to be into the group work." Michelle said that it was hard to parse what Donna really expected from the students. "Did she want us to make the decision?" asked Michelle. "We asked [Donna] about her expectations for working on the assignment individually, but she just went on and on that it was going be a lot more work and a

lot more difficult. So, we just went with the group work.” When asked what gave Michelle that impression about Donna, Michelle replied,

One student asked about whether the length of paper would be longer or shorter if we worked individually or in groups. And from that question, we could tell that [Donna] thought we were trying to figure out which one was easier. And, right then, she changed the direction of our discussion, trying to convince us to do the assignment in groups.

As we learned earlier from Donna, perhaps the abrupt change of direction in the conversation came because it frustrated Donna when students focused on what Donna called “unimportant” questions. After several decades of teaching, Donna said that she found this level of conversation with students really annoying. Knowing that such questions frustrated Donna, I asked Michelle, “Were you trying to figure out which would be easier?” Michelle replied, “No. We’re trying to figure out her expectations for marking. If we have a choice to do the assignment individually, then how would she be marking?”

Michelle soon revealed why this stage of learning the assignment was so pedagogically important. Hidden beneath her demand for “clear expectation” was a fourth year nursing student attempting—and struggling—to link this assignment task with the broader curriculum. She revealed,

This is about being in a collaborative program where we are self-directed learners. We are going to have to collaborate with other people in professional nursing. But when we are asked to take steps toward self-directed learning, the decisions are made for us. We’ve been coddled too much in this program. And I would think that by our eighth scholarly paper, when the teacher says that we have a choice to do a paper in a group or one your own, then they’d trust us to make that decision for ourselves. They give us

choices that are really not choices. How are we supposed to learn when we're not trusted? I don't get the point of [these assignments in] CBL [i.e., the self-directed learning curriculum].

Andrew was also attempting—and struggling—to make sense of self-directed learning and how that was supposed to fit into writing scholarly assignments that “lacked good direction.” He accumulated three years' worth of frustration with the design of scholarly assignments. He remarked,

The scholarly assignment is a *BIG* [Andrew's exaggerated emphasis] part of our tutorial experience and probably the biggest source of stress because of a ridiculously high mark value and how it affects your final grade. . . . They don't exactly make it clear what they are asking for. I don't like them. I don't understand them. I don't understand how papers have any bearing on nursing practice.

Andrew said that he didn't like writing scholarly papers because he rarely received good direction, even when he tried to ask for it. He had difficulty with self-directed writing because the assignment details and instructions from year to year “looked different.” Sometimes they were “over detailed” and other times “under detailed” and receiving too much information was just as bad as too little information. Andrew felt that students needed some guidance “especially with new projects” that asked students to perform new intellectual tasks and writing activities, such as this fourth year scholarly paper that asked students to create their own topic and content. He said,

This was a new project with *huge* topic [Andrew's emphasis] and [the instructions were] structured in a way we hadn't seen before. With papers, we pretty much know what we need to do. But this project was something completely different, so at the point of starting

it, we are really not entirely sure how to go about it. . . . Our group really needed direction with narrowing down our topic. We asked for [Donna's] help. She did not give us a *huge* amount of direction. She really didn't give us direction at all, but that was not unexpected, because we are expected to be self-directed learners. But we didn't know *where to look*, or even *what we were supposed to be looking for* [Andrew's emphasis]. That becomes detrimental to learning nursing, or learning to write for that matter. You can't finish a writing project if you can't even begin it.

Perhaps the reason Andrew thinks that he has rarely gotten good direction with the scholarly assignment—including this Year 4 assignment—is because Andrew's word choice did not accurately reflect his intellectual need. He asked Donna for help with narrowing down his topic but he really needed assistance with where to look for information about his topic and what subject matter categories would be most relevant to his topic. Legal educator John Conley and social anthropologist William O'Barr (2005), who used conversation analysis to research the discourse, language, and sociolinguistics in law, suggested that law students who could not accurately communicate their learning needs had a shallow repertoire of language and often lacked the capacity to apply what little language skills they had to intellectually demanding tasks, such as learning new strategies of court room disputing. Education researcher Stephen Brookfield (1987) claimed that college students who come from working class school systems often did not have the language skills needed to engage with college assignments that aimed to improve a students' intellectual development and critical thinking skills.

From my own tutoring experience with nursing students, I have noticed that students often did not use words that accurately articulated their learning and writing needs during the process of writing their scholarly assignment. One tutoring approach that I found helpful for

students like Andrew, who viewed his topic as unmanageable and without clearly defined instructions, was to re-frame the topic in terms of a problem to solve. Structuring the assignment in terms of problem-solving, or what Bean (2011, pp. 153-154) called creating *problem-posing assignments*, provided the needed bridge between the teacher's guidance and the student's writing performance. This approach also helped turn students' focus away from their (mis)perceptions of mixed messages or unclear instructions onto their own writing performance.

Linda was a nursing student who reported a different writing experience than Andrew, Gwen, and Michelle. Linda was also one of the students who voted for group writing. Linda said that she was able to link Donna's expectations and intentions to the broader CBL framework/outcomes because of the way the assignment was designed. When asked about her experience of learning to write this scholarly assignment, Linda emphasized that the fourth-year scholarly assignment was "different." She described the different ways that Donna had designed the assignment and noticed that Donna gave students an independence they had not experienced before. Linda claimed there was "sort of a lack of structure," which she noted,

was different and beneficial for independent learning. As a fourth year student, this was the first time we were given the opportunity, not only to develop our own topic, but to create the information we wanted to include, as well as our own thesis or topic of information. Usually, it's like, here is your topic, or your three choices of topics, I should say, and they tell you what your percentage [i.e., mark value] is going to be. This time, the [scholarly] assignment had no structure.

Linda recalled the class discussion about working in groups and, from her perspective, instantly saw the benefits and advantages of working as a group on this scholarly assignment. She had an explicitly clear sense of her own learning style, mentioning that she saw herself as "a big

researcher” who liked “to develop resources and strategize” with her peers. She clarified, “writing a paper collaboratively is a good fit for my learning and writing style” and co-researching a topic and structuring an entire project collaboratively “is almost a dream.” Implicitly, however, the collaborative opportunity was a way for her to test the validity of a pedagogical system that she had now experienced for four years. She described,

As a student, we are almost too narrow-minded about nursing when working alone. In nursing, especially in Canada, it’s important to have somebody with another cultural perspective and different background from your own. The benefit that I saw [of writing in] groups was not that it is easier, because working in groups is not easier, but that we get to implement the CBL process and collaborative nature of this program. We’ve been competing with each other long enough now. [This is my chance] to co-write and co-research the importance of nursing leadership and management and put it all together as a big solid knowledge base and then end up with something completely unique that came from both of our hands.

When asked about what she learned from implementing CBL and the collaborative process of writing this fourth year scholarly assignment, Linda pointed out that from the student’s perspective CBL doesn’t work without classroom discussion and that in order for the grouped components of the assignment to work within the CBL context, the students had to have a “trusting partnership.” The next section will discuss the students’ expectations of learning/writing the scholarly assignment. Building trusting partnerships in the learning environment was a dominant theme.

Students' Expectations

Building trust in the learning environment. All six participating students expected the writing assignment to be taught in a transparent and trusting learning environment. They expressed an empathetic attitude towards the challenges that instructors faced when teaching scholarly assignments in the CBL context. They reported that their greatest challenge to writing this group assignment was creating a learning environment of trusted partnerships between the students and the instructor as well as with their peers. Linda articulated it best,

We know from writing after four years in nursing, you can't write a full assignment in a night or even in a weekend. You have to take time to talk with one another, to define and redefine what you are brainstorming, outlining, writing, or reflecting.

In that time span of drafting and talking with one another, she noted, "you have to learn to trust the other person, [and] that they can take you where you want to go with your writing." When asked to identify a few aspects of trust that were important to learning/writing this scholarly assignment, Linda responded that it was important that partnering students have "similar work ethic and writing style." She went on to describe something slightly more fundamental to postsecondary *group* writing and learning, such as peer reliability, compatibility, and writing capabilities, and that successful group writing required "common ground." Linda explained,

Every one has their own commitments outside of school, everybody has their own level of effort that they like to put into school . . . and to write together successfully you have to be on common ground, especially when its for your grade in fourth year. I lucked out with my group; [neither] of us were procrastinators, we delegated the research tasks, did a lot of planning, covered all the areas of content, scheduled what we wanted to complete,

and we allowed at least a week to write the paper portion of the project. Yeah, being on common ground helps with the [writing] process.

These were important, Linda asserted, because “at some point in a small group there will be conflict. . . . And it can [bring] your writing to a halt and then you’re stuck. But . . . if you know each other’s work ethic and writing style, you can get unstuck.” When asked what she meant, Linda gave an example of her own group conflict. She described,

We each saw a different route to editing the paper. We got caught up on perfecting each sentence and paragraph . . . which was challenging because we all wanted this to be perfect and spent hours discussing the pros and cons of improving our writing. If I didn’t trust my co-writers, then I would not have been able to accept when one of us finally said, ‘hey, just get on with it’ and . . . because I trusted her writing judgment . . . we just moved onto APA and referencing.

Linda concluded, “Knowing your partner and that she is putting 100% effort into it is very reassuring and that is when CBL works—when you can trust your partner as your collaborator and co-writer.” Trusting each other’s writing judgment was integral to a nursing student’s experience of learning to write.

The issues surrounding trust and students’ expectations of a transparent and trusting learning environment had a subtext that related to power and control over students’ self-directed learning. According to Baecker (1998), students often pick up such subtexts on the first day of class when they read the syllabus or (as in my case study) multiple documents describing the writing assignment. Baecker (1998, p. 60) wrote of the syllabus, “All of these issues of power and authority come together in this document, the creation of which, it is important to note, is a right reserved for the instructor. Our students certainly don’t come to us on the first day with a

written list of their demands and expectations.” Baecker claimed that when students read the syllabus, they embark on a semantic analysis of assignment descriptions, look for language that establishes control (i.e., assessment, evaluation), and decipher language that appears inclusive and collaborative but really is not. Baecker noted from her own meta-analysis of course syllabi that “if the syllabi I examined in this study are any indication, we do a very poor job of negotiating power” (p. 61) in the classroom. In the context of my study, it appears to be the same in self-directed learning classrooms and curricula as well.

Joseph Hoey and Eleanor Nault, two assessment researchers at Georgia Institute of Technology and Clemson University respectively, did not expect to find that trust was the “missing ingredient” in student learning and assessment (2002, p. 117) of undergraduate engineering education. Parochial issues of mistrust and perennial debates of power and control surfaced in Hoey and Nault’s focus groups, which were exclusively made up of engineering teachers. When faculty were asked to identify trust barriers to and create trust-building strategies that could improve teaching engineering, the focus group members discovered that they could not define what was important and meaningful about student assessment and learning in engineering, especially in a cultural and philosophical sense. They recognized a need to create definitions before strategies. Any proposed strategy could be *useful* but not necessarily *meaningful* to the process of assessing student learning. Participating engineering educators concluded that the better solution was to change how assessment questions were being asked (p. 124) and to start a perennial, evolutionary discussion to define *meaningful* learning environments, *meaningful* assessment, and *meaningful* changes (see pp. 122-123) that build trust in engineering curricula and assignment assessment.

Hoey and Nault claimed that to discuss anything meaningful in student learning required trust and determined that trust was “necessary” and “the very first step” (p. 119) for students, instructors, faculty, and administrators to share the responsibility for (and be capable of) identifying priority issues, meeting curricular goals, achieving intended learning outcomes, and building a long-term sustainable assessment system for grading writing assignments. This was also clear in Friere’s (1970/2009) research to understanding cultural problems, power, and paradoxes in the practice of student-teacher trust. Friere viewed classroom learning as a matrix of cultural action and philosophical entanglement (2009, Chapter 4, pp. 125-189).

Barbara Walvoord and Virginia Anderson (1998; 2010), through their personal experiences in the classroom and from listening to college faculty from workshops at hundreds of institutions around the United States, found that college teachers “spent nearly every day of their teaching lives wrestling with the problems, the power, and the paradoxes of the grading system” (1998, p. xv). Walvoord and Anderson (2010, p. 5) designed their workshops so that instructors could understand that grading was a “context-dependent process,” that student learning and assessment served multiple purposes, and that grading played a tangible, significant, and integral part of how students became involved in the assignments of the course. In their second edition, Walvoord and Anderson made it clear that whenever grading was part of the learning, then it was critical to have a “healthy level of trust” (p. 125) in the learning classroom. Chapters 9 and 10 (pp. 125-150) provided detailed overviews with examples and guidelines to help college instructors talk about classroom assignments, evaluation, feedback, and marking criteria of the grading process, and included several secondary resources to learn ways to establish trust and build trustworthy communication in the classroom (p. 126).

Participating students emphasized that building trust with the classroom tutor was integral to writing the scholarly assignment because it motivated them to engage in all the steps and stages of the writing process. Students claimed that the tutor played an important role in guiding their “steps of developing ideas” and keeping them “on the right track” as they progressed through their “planning stages.” When asked what it was about trust with the tutor that impacted or influenced learning to write the scholarly assignment (either in the past or with Donna), all six students replied that they had more trust in a tutor who made herself available, approachable, and accessible to help with their writing assignment needs. Two-thirds of participating students reported that Donna was available “almost 24/7.” Gwen actually found it “amazing” that when her group emailed questions to Donna about how to organize the order of their presentation, Donna “responded the next day.” Gwen said, “[my group was] able to finish the content over the weekend and start rehearsing on Monday. Our presentation went really well because of that.” Linda pointed out that Donna often responded quickly to her questions because Donna used “texting” with the students. Pleased with this level of communication, Linda said, “It shows that [Donna’s] willing to talk to us in the way that we talk to each other. Some tutors want us to go to their office, but that’s what they did when they were students. You won’t find most students willing to do that.”

Donna was sympathetic to fourth-year students’ schedules and clinical priorities and stated that she was intentionally available for students around the clock because their schedules were very demanding. When asked if she recognized the impact that her accessibility had on students’ learning, she replied that she never thought of “being accessible” in terms of its pedagogical significance but rather in terms of professional courtesy. She was also conscientious that being available modeled the disciplinary tenet of “collaboration.” Donna emphasized that

fourth-year students were now “in practice,” meaning students were working independently with the guidance of preceptors in their senior clinical practicum. Through texting technology, Donna could respond to her students’ questions about writing the scholarly assignment for this course.

Mikki made reference to the demands of her fourth-year nursing schedule but said that she found it both fun and challenging. She noted, “We look forward to this because this is what we’ve worked for the last three years . . . but we still have tutorial [assignments] to do and we need some direction.” Mikki highlighted the importance of Donna’s accessibility to her group project and that without it they would never have stayed on task and met the deadline. Mikki talked about how her group decided to create (and learn) something about international nursing and used the experience of one group member’s involvement with a non-governmental organization (NGO) that provided safe drinking water for poor communities in Guatemala. During her group’s brainstorming session, one member suggested that instead of writing a “paper” they should write a “partnership proposal” to the NGO (with whom Mikki’s peer had an established contact). Mikki texted Donna with their proposal idea and Donna liked the idea. Donna suggested components to include within the proposal, which would need to include epidemiology, care needs assessment, and education outreach.

Mikki recalled that during the process of writing the proposal, they “felt stuck” while drafting the educational component. She explained,

We just couldn’t make it flow and felt stuck, really, because we just had too much good information to include in our paper. So, when we got stuck, I texted Donna. I asked her if she could come and look at our draft [because we were located in the nursing education building where her office is], and she was on the ball. In five minutes, she was right down. . . . She was really encouraging; she loved our ideas, and she said, ‘don’t kill me

with statistics' and to focus on the needs assessment. . . . So I *loved* that she was so accessible.

Mikki asserted the value of texting with students and felt that this experience of getting such a quick response from Donna contributed significantly to “finishing on time and meeting the deadline.” Then Mikki hesitated, looking down for a moment to catch her thoughts. At this point in the interview, Mikki realized something significant to learning the genre,

In thinking about it now, I guess this was more than just needing encouragement or direction to make it flow better . . . actually, [Donna] made it [i.e., the genre] more appropriate as a *nursing* proposal [Mikki's emphasis].

Here, Mikki realized, and later acknowledged in our interview, that she was not writing to learn a genre but rather to get the grade she wanted. However, in talking with me in the interview about it, she made herself aware that she learned how to write a nursing proposal. It is important to note that she did not realize what she learned *about learning and writing the genre* until she was asked to talk about it *after* the assignment was handed in. Talking about the assignment *after* it was due was as significant to learning to write the genre as before and during the process of writing, drafting, or revising. In Roger Moni's (2011) mixed methods study of writing in undergraduate nursing education at Griffith University in Australia, he found that almost 70% of respondents did not engage in any kind of review after the assignment was submitted (p. 64). Moni suggested debriefing *after* the assignment's due date and after the marker had given feedback to help students learn how to use feedback to develop their writing skills (p. 23) and help students integrate academic and professional writing (p. 11). He recommended that students talk with peers, learning specialists, and the nursing instructor. My study's third-year nursing students Carmen, Amber, Edward, and Anita also suggested debriefing

of scholarly assignments may help students “clarify what is still confusing” (Anita), explicate “vague written comments” (Carmen), and determine what aspects of text actually count as “scholarly” (Edward).

Constraints to Students’ Learning

(Mis)Perceptions of teaching. Mikki’s earlier story of texting with her instructor illustrates the role that students’ own perceptions play in (not) learning academic or professional genres and brings to light the untold strategies that students have learned to use in the classroom to get through school without learning the genres they are asked to write (e.g., Applebee, 1996; Barnett & Coate, 2004; Hillocks, 1986; Rose, 2014; Smagorinsky, 2006, Walvoord & McCarthy, 1990; Weimer, 2013). Mikki and her peers used a stealthily strategic approach (learned by students as early as third grade; Chapman, 2006) to complete this scholarly assignment.

Earlier, Mikki reported that she and her peers asked Donna for some guiding help with writing the partnership proposal. It’s important to recognize that at this point there is a divergence of what the teacher believed the students were doing (subject matter knowledge, writing development) and what the students were actually doing (what/how they will be assessed). When Donna suggested components for the nursing proposal, this group of students actually took the teacher’s suggestion(s) and turned them into a personal, individual marking rubric guide, unbeknownst to the teacher. The students actually convinced themselves that if they didn’t include everything suggested by the teacher then their mark would be reduced.

However, the teacher did not encourage this. From the teacher’s perspective, she was routinely *helping* the students get started with the subject matter; but from the students’ perspective, she was *outlining* assessment criteria for their particular project. In actuality, the teacher was routinely *helping* the students get started, *not negotiating* marking criteria. However,

the students strategically used the conversation as a means to discover what the teacher wanted them to write (or what nursing participants called finding tutor preferences) and would hold the teacher accountable to those suggestions for marking and/or assessment.

This student enquiry was not an intellectual engagement (cf., Robert Haskell's 1999 research of unconscious meaning in everyday conversation). In fact, it turned out to have negative consequences and inhibited the students' ability to write with "flow." Earlier, Mikki said that they got stuck when attempting to write a section of the proposal that was suggested by Donna. The students may have actually created their writers block because of their own presumptions and perceptions about what Donna wanted them write. They were too preoccupied with inventing components of the proposal that they believed were "what the teacher wanted" rather than believing they were central to the genre, and they did not possess the literary skills or have the confidence to write what they imagined the teacher expected of their writing. Genre theorist Carolyn Miller (1994, p. 75) called this writing for the rhetorical communities that "we carry around in our heads," trying to reproduce, reconstruct, and replicate ourselves to belong to that discourse community. In the case of my study students, writing to belong becomes an indelible challenge to learning nursing when it is unauthentic, meaning that the nursing student is attempting not to write but to conform to how he or she is seen by the *other* (hooks 2009; 2010). In Mikki's case, this kind of affective student thinking, perception, and presumption constrained the students' ability to freely write the nursing proposal, or as Mikki said, they felt stuck and couldn't make it flow.

Lisa described how her perceptions of Donna's approachability affected learning to write the assignment. Lisa called Donna a tutor who was "approachable with conditions." When asked what she meant by conditions, Lisa remarked, "Sometimes [Donna] addressed us in a way that

was kind of condescending. That made it seem like she didn't care. . . . It also made me afraid to approach her." When asked what Donna said or did that made her afraid, Lisa didn't really talk about Donna. Rather, Lisa then went on to describe herself as an "introvert" and perceived Donna as an "extrovert with extroverted approaches" to teaching. Research by Susan Cain (2012) on introverts and extroverts claimed that in classroom learning, introvert students are *intellectually sensitive* to a teacher's voice tone, body language, eye contact, and word choice. Since Lisa was a self-proclaimed introvert, perhaps she may have been afraid to approach Donna because Lisa *perceived* condescending remarks simply on the basis of extroverted expression, voice tone, or what Lisa called "undertone." Lisa admitted that she was more sensitive to covert implications as well as phonetic undertones of oral instructions and classroom discussion with tutors. In spite of Donna's efforts to be available to the students, Lisa could not escape the feeling that Donna had an undercurrent, that there was something "ungenuine" about Donna, and for an introvert like Lisa, that was just enough to "break trust" with Donna. Lisa noted,

I found that [Donna] made us feel comfortable more than other tutors. But at the same time, when she said she was available, it had that hidden meaning behind it, that undertone. It felt rehearsed and ungentle. . . . But, then again, I've grown accustomed to feeling like this towards [our teachers] over the years. I don't know if they are true or not, but that is how I felt when [Donna] tried to ensure us that she would be available to us. Maybe she really did want the best for us, but it did not come through. It felt like she wanted the best for us because it would be the best for *her* [Lisa's emphasis].

Donna was well aware that she was highly criticized by her students, especially for not telling the students her explicit expectations. She knew they wanted her to tell them exactly what she expected. From her perspective, she thought, "[These students] are graduating and going to

be finished with their baccalaureates, and [they're] asking me three months before that?" She continued to emphasize that the students did not want to know her expectations about nursing knowledge or how to achieve course learning outcomes. Rather, she claimed, "They want to know about the marking. They are still very marks focused." In the classroom, Donna persistently attempted to redirect students' questions about assessment. She stated, "I want them to make decisions and I want them to set their own expectations. I don't want them to write for *me* [Donna's emphasis]."

Try as she might, the I-want-they-want tug-o-war is a losing battle. Students will push back, resist, and even reject independent decision-making when the purpose of writing is unidentified and the language of self-directed learning remains undefined, unclear, or misunderstood across the baccalaureate nursing curriculum. According to education researcher Phil Candy of the University of Southern Queensland, these are common problems in almost every college classroom and are counter productive to self-directed learning classrooms around the world. Candy (1991) conducted one of the most comprehensive reviews of self-directed learning. His study was framed in concepts of language autonomy and focused specifically on aspects of how adult students learn how to learn through learning language. He made a clear distinction between learning how to learn as a goal and method and learning how the two apply to practice. Candy noted that classroom learning problems surfaced because *learner-controlled activities* were conflated with *autodidaxy*, which means knowing how to learn what one needs to learn in practice. Candy explained that the typical assignment was formulaically designed for students to select a topic, do an independent study of it, and then report back to the class. He suggested that such assignments limited self-directed learning because they only engaged the

students with the audience of the classroom and that the scope of such assignments never extended beyond academic assessment.

Candy's (2004) recent research in Australia on self-directed learning in the digital age, showed that learner-controlled activities still dominated postsecondary education in online learning environments. He claimed the biggest detriment to self-managed and self-directed learning, even in an age where access to information and instructors are at the touch of a keyboard, was that the student never saw beyond his or her own role as a student. Candy found that completing the formal (writing) assignment for an assessor or marker was the learner's primary objective. As Candy's (1991) earlier study implied, when postsecondary students did not see themselves beyond their student role, then graduates at best fell somewhere between learning how to learn as an academic goal and learning how to apply learning to practice. Most undergraduates focused on academic grades, never searching beyond the rewards of academic success (cf., Benson Snyder's 1970 research of the hidden curriculum).

Regarding (mis)perceptions of teaching this scholarly assignment, Donna spent a significant amount of time talking about her perspective of students' apparent fixation "on letter grades and perfect APA." Donna felt these countered her efforts to teach students how to be evidence-informed professional nurses and took the focus off of learning "what scholarly writing really is." From Donna's perspective, learning "scholarly writing" was more than "writing a paper or making a poster or searching for literature." Embedded within Donna's perspective of "scholarly" there were "many kinds of scholarly genres" and she hoped that her assignments helped students to understand that scholarly academic work was about "critically reflecting and thinking about the profession and clinical decision-making for professional practice, not the letter grade." However, "behind the grade," Donna remarked, "students believe that if they get an

A on this paper it is more scholarly than a C+.” She was frustrated by the influence of letter grades because “students think that they are nursing scholars if they are A-students.”

Students also conflated academic scholarly thinking with APA style and formatting. When asked if Donna could define or describe what students think scholarly writing is, she replied, “I think students think it is APA.” She explained that, “We start explaining APA in first year,” and somehow APA overpowers everything students are supposed to learn about nursing through scholarly writing assignments. Donna continued, “Students believe they are scholarly if they get perfect APA” and they spend three years adapting to tutors who “are so stuck on APA that they give a big weighing to it. . . . Students focus on APA and assessment because we have too many tutors who focus on it.” Donna did not have a tolerance for this kind of APA-focused learning environment or for other instructors who cultivated academic success around grades and explicit marking expectations. Unfortunately, though, the high mark value of 45% contributed to such a culture and nursing students could be stubborn about grading and explicit marking expectations. “Students want me to tell them exactly what I expect,” she begrudged. But she resisted.

Donna had her views on the culture of assessment and its influence on students and instructors (and how she differed from them). As she talked about her teaching and marking, she revealed things about her own grading and marking, which had a deeper—and quite layered—meaning that was surely hidden from students. She revealed,

I focus on a higher order of thinking. In the paper, I don’t want them to just tell me what the literature says. I want to know what they think. I always tell them that I want to know what they think. That is one reason I [include] the presentation [as part of the scholarly assignment], because I want them to teach their peers. Of course, that is a piece of the

whole context-based learning. I want them to hold the attention of an audience. I want them to understand the principals of teaching and learning. They may be teaching a group of cardiac patients how to use anti-coagulants at home. They may be teaching pre-natal classes. I want them to determine [the difference between] priority knowledge and what is nice to know; I want them to gain confidence in presentations and public speaking. That all contributes to confidence and graduating [as] competent practitioners. In the reflection piece, I want them to be reflective practitioners for the rest of their careers. You go home every night saying what went well what didn't go so well? What would I do differently? What does the literature say? I asked them to do this. And that is what [marking] means to me.

The Elephant in the Room

Donna concluded our interview by saying that she was a “huge fan of context-based learning.” However, she confided that there was an elephant in the room: current enrollment and class size contradicted the principals of context-based learning. I close this section with Donna's own exact words about curricular hypocrisy. Her statement is rather lengthy in description, but adequately captures what all baccalaureate nursing programs are facing (Marilyn Oermann, personal communication, Duke University, February 22, 2014; Dean Whitehead, personal communication, Massey University, December 4, 2013). Donna concluded,

In this term coming up, there are 56 students. That's ludicrous. How can you assess and support that? Sometimes, I find that at the end of a course, I am writing evaluations on students that I don't know who they are. That is scary, scary, scary. It goes against the principals of context-based learning. Context-based learning, ideally, is 6-8 [students per class section]. Double that: tough. Triple that: kill me now. Yet, we keep doing it. I don't

know what to say. We try to be good stewards of the dollar, but context-based learning is labor intensive and financially intensive and we have to have a huge commitment to it. Bumping up class size is frustrating for educators as well as students. And it gets even more frustrating when the purpose of context-based learning is lost to getting a good mark. It's tough to get that elephant out of the room. . . . [Students] don't understand that when they are [given an assignment and] asked, 'what would you do in this situation or with this kind of patient,' that the question is a scholarly question." My marking comes from [students' ability] to answer that question and to prioritize what the content is [regarding clinical decisions for professional practice]. That is my story and I'm sticking to it.

Year 4 Informal Interviews

After I conducted, transcribed, and analyzed participants' semi-structured interviews, I conducted an informal, voluntary focus group with four fourth-year students: Brian, Meghan, Sophie, and Wendy. The focus group lasted about 30 minutes and the purpose was to discuss the preliminary findings from the semi-structured interviews and get feedback on my understanding of what the other participants said about learning to write the scholarly assignment. I met with the focus group in a familiar common meeting area on campus and I did not audio record this informal interview, so there are no transcriptions; only my own field notes.

Brian, Meghan, Sophie, and Wendy all agreed with the study participants and the findings that I presented in this chapter. Between them, they respectfully recommended two things that enabled them to successfully writing the scholarly assignment in Year 4: (1) linked courses and assignments; and (2) mentoring younger nursing students in the same program.

Linked Courses and Assignments

There were two kinds of assignments that linked directly to this fourth-year assignment: a previous group writing assignment in Year 2 and an independent research assignment in Years 2 and Year 3. Brian and Wendy were two students who had experienced a group writing assignment in a Year 2 nursing tutorial course and they relied on that experience to help them through this group writing assignment, especially in areas of delegating responsibility (who does what part of the research), negotiating work load (what is fair for each member and what gets fairly distributed across the project), and anticipating potential conflict (strong opinions, personalities, writing styles, etc.). Brian said the most important aspect of having previous group writing experience was that it alleviated his stress levels because he previously learned ways to manage disagreements, mitigate varying opinions about how to complete the assignment, and incorporate differing writing styles into one final product. Meghan and Sophie said the assignments in a third-year nursing research course helped them because they were prepared to take on an independent research project that explored each of their professional nursing interests. Meghan mentioned that she was able to conduct an independent project in Year 2 with an instructor “who had a PhD.” She was convinced that the faculty needed more PhD-level instructors. She believed, “PhDs do more research and they do a heck of a lot more writing.” The other three students concurred with Meghan’s statement.

Mentoring Younger Students

Brian and Sophie claimed that the mentoring program was the best way to share with other peers what they’ve learned across the years. First-year students were “really new,” often felt lost in the curriculum, and “did not quite understand the nursing profession as a whole” (Sophie). Brian said that first- and second-year students tended to “see what media has shown” in

Grey's Anatomy and *House*. As a mentor, he got to “show them what we actually do and how we have to go about learning it and get to explain to them how we write our writing assignments.” Brian said that the moment it really dawned on him that he had learned scholarly writing was when he was explaining to a first-year nursing student “that writing in clinical was different than writing the scholarly paper” or when he was asked by a first-year student to review her paper for APA problems but ended up explaining to the student how to revise her introduction more appropriately for the instructor (whom Brian knew). Brian was the only participating student in my study who used the exact words, “I learned to write when . . .” and he claimed explicitly that he learned to write when mentoring and teaching younger students how to write.

Year 4 Closing Remarks

This chapter discussed instructor and students’ expectations, the constraints and enablers that their expectations had on students’ learning and the tutor’s teaching, as well as the hidden meanings behind learning to write the assignment, which in this chapter included an entanglement of deeper attitudes, values, beliefs, fears, assumptions, and perceptions and converging histories of individual teaching/learning strategies and teaching/learning styles that attempt to co-exist in a context-based learning (CBL) curriculum, and in doing so, bump up and rub up against one another.

The instructor’s expectations of teaching the scholarly assignment varied widely and overflowed with expressions of *I want, I expect, I prefer, we need, they want*, etcetera. Expectations varied to the extent of sending mixed messages to students, which constrained students’ ability to fully engage with learning the components of the assignments (group presentation, group paper, and individual reflection). Her teaching was constrained by her own contradictions and perceptions of lower- and higher-order concerns of students’ scholarly writing

and personal desires of what soon-to-be-graduates should learn from scholarly writing assignments. She was frustrated when students focused on format, length, and assessment (and dissuaded such conversation) and enlivened when the discussion focused on content and principals of nursing care. When possible she encouraged students to be creative in communicating context-based nursing needs and designing educative nursing materials.

The students' expectations of learning the scholarly assignment hovered around transparency of assessment and trust in the writing environment. Students were constrained by the mixed messages sent by the instruction. Their learning was also constrained by their own self-perceptions and presumptions about the instructor's teaching style and their peers' learning styles. Students were enabled by good assignment design that helped them practice and achieve CBL-based learning outcomes, an approachable, available, and accessible instructor to help them through the entire writing process, and writing with peers who had similar writing and presenting capabilities and/or previous experiences of group writing and presenting.

Students revealed two aspects of learning that had a hidden meaning behind them. First, hiding behind students' demand for clearer, more explicit expectations of writing and assessed writing was their confusion (and hence mistrust) about how scholarly writing fits into the broader scope context-based learning and self-directed learning pedagogies. Second, behind student-initiated questions about learning how to write the assignment were inadequate language skills to communicate his or her actual learning needs.

The instructor revealed three aspects of teaching that had a hidden meaning behind them. First, hiding behind the instructor's concern of focusing on letter grades and APA formatting was the assumption that students think they are nursing scholars when they produce A-level marks and APA-perfect papers. Second, behind the marking of her own assignments, the instructor had

covert, unstated assumptions that students will produce higher levels of thinking about nursing practice, principals, reflection, and personal growth, confidence, and competency. Third, there was an elephant in the room regarding the successful practice of teaching nursing students to learn to write across the nursing learning curriculum: class size and teaching load. Both violated the very principals of context-based learning. The theory behind context-based learning was being violated by the practice of it.

Year 4 Summary of Findings

This chapter presented responses from seven voluntary and individual semi-structured interviews with six students and one instructor and included one voluntary, informal endorsement focus group with four students, all of whom talked about there experiences of teaching and learning to write one multi-component assignment called the *scholarly assignment* from one fourth-year nursing tutorial course. The main findings were:

1. The instructor had at least 28 explicit expectations of fourth-year student writing. There was an overflow of expectations, wants, and preferences about teaching the scholarly assignment. Personal perspectives, attitudes, values, beliefs, hopes, and desires were entangled with professional intentions, academic expectations, and disciplinary perceptions.
2. Too many expectations and entangled discourses constrained the instructor's teaching. Explicit expectations became problematic because when she discussed the assignment with the students, she unintentionally (or unconsciously) spoke with many voices and mixed messages.
3. Mixed messages constrained students' learning in three ways: explanation was contradictory, assessment was confusing, and directions were lacking. Examples of mixed messages were:

- a. You decide but I'll decide for you: small groups were supposed to be decided by the students, which the students did, but mid-process the instructor rearranged small groups. The detriment to learning how to write was putting students with unfamiliar peers and disrupting the collaborative writing that took place before the breakup of the group; and
 - b. An option that isn't an option: students were permitted to do the assignment individually or as a group, however, the instructor encouraged group work and collaborative research by appearing to penalize individual work and independent research. The detriment to learning how to write was not accommodating different learning styles or personal writing preferences, which tend to optimize engagement, motivation, and completion of writing assignments.
4. Assignment design that was clearly linked to the broader CBL framework/learning outcomes enabled one student's learning in two ways:
- a. She practiced self-directed learning by independently developing her own topic (not having one given), choosing her own (re)sources, creating the content, and organizing how the content in each of the components would flow together. This connected directly to her professional development in that she explored personal/professional interests of nursing leadership; and
 - b. She practiced collaborative learning by co-researching with a partner of choice. In this case, the student partnered with peers from a different cultural perspective and background than her own but who had a similar work/study ethic. The benefit to learning how to co-write this assignment was negotiating various individual and group tasks and then putting them together as a collective whole.

5. The mentoring program enabled upper year students to teach younger students how to write. The mentoring program had the most positive reinforcement and lasting influence on upper-level students' scholarly writing.
6. Students expressed constraints regarding learning to write the scholarly assignment. On the surface, students complained about the instructor's mixed messages, confusing explanations, and lack of direction, but hidden underneath the complaints:
 - a. Students struggled to make sense of a broader curricular expectation of being self-directed learners. Students brought up two acquisitive examples: If the degree program expected students to be self-directed learners then, (a) why were they coddled in their writing assignments; and (b) not trusted by instructors to make decisions for themselves? and
 - b. Students did not possess adequate language skills to appropriately articulate their real learning and writing needs.
7. Students expected transparency and trust in the peer-writing environment. Students commented particularly on the need for peers to be transparent and trustworthy when being assessed on group writing and group presentations. Transparency was described as having common ground between peer writers and familiarity with co-writers/co-presenters' work ethic and writing style. Trust was described as knowing each other's writing/presenting capabilities, compatibility, and reliability, and comfortably trusting each other's writing judgment.
8. The instructor's availability, approachability, and accessibility through mobile technologies such as texting enabled students' learning in three ways:
 - a. Accommodated students' nursing shifts, field practice, and academic schedules;

- b. Helped students stay on task throughout the process and meet the deadline; and
 - c. Assured students could turn to their instructor when they ran into difficulties. The benefit to learning to write only occurred when the instructor responded quickly and timely to their query.
9. Self-perceptions and presumptions constrained students' learning, mostly stemming from students' own personality or sensitivity towards the instructor's (non)verbal expressions, such as word choice, voice tone, undertone, body language, facial expressions, and eye contact. An example was an introverted student trying to learn to write from an extroverted instructor. The detriments to learning to write were self-induced writer's block and inauthentic writing, such as writing what the teacher wants or conforming/inventing writing according to how the student perceives that he or she is seen by assessors.
10. Personal beliefs and convictions constrained the instructor's ability to respond to problems and paradoxes of the self-directed learning classroom (in CBL/PBL context). Students attempted to discuss assessment but tended to focus on format, style, and length. The instructor avoided conversation about marking details because she personally believed that soon-to-be-graduates could think, write, and decide for themselves. The detriment to learning how to write was that:
- a. Students pushed back, resisted, and even rejected collegial and professional conversation about content or genre. This blurred the purpose of writing; and
 - b. Learner-controlled writing activities tended to limit self-directed learning. The instructor was convinced that students in their final year of undergraduate nursing would know how to put their learning needs into practice but students never had this

degree of independent decision-making before and needed more guidance than the instructor was willing to accept.

11. The instructor expressed three constraints to teaching the scholarly assignments:

- a. First, hidden behind APA-perfect papers and A-level grades, students started believing that they were scholarly writers or nursing scholars. From this instructor's perspective, students were too focused on letter grades and the style and formatting of scholarly writing, but only because tutors were too focused on marking papers for APA not content;
- b. Second, hidden behind the marking guide handed out to students, the instructor had different expectations for student writing than what she explicitly wrote on the marking guide; and
- c. Third, there was an elephant in the room: class size was far too big for the curricular model of context-based and self-directed learning. Current enrollment was more than triple what the curricular model allowed for. The ramifications were that the instructor wrote student evaluations (a critical component of the curricular model) for students she didn't even know and students were left too much on their own to develop their nursing interests, without proper direction or guidance from the instructor (instructional commitment is fundamental to self-directed learning).

12. Students in the informal endorsement focus group revealed:

- a. Students want to carry learning activities from one course to another. For instance, this fourth-year assignment included a group writing/presenting component and students claimed that previous group writing activity from another course directly applied to this assignment. Having previous group writing experience reduced their

- anxiety of collaborating with unfamiliar peers. Students felt that it was important to be equipped with the social skills needed to co-write a high-mark value paper with another peer who may have a different writing style or level of writing; and
- b. The best way for upper year students to learn to write a scholarly paper was to teach younger students how to write it. Mentoring and teaching younger students was the only approach where students internalized the learning-to-write/writing-to-learn pedagogy of this baccalaureate nursing program. By internalized I mean that students practiced both cognitive skill and emotional satisfaction. Surprisingly, the only time students in this study used the exact words *I learned to write* was when they told their own stories about teaching writing to younger students.
13. When asked to describe learning genres in Years 1, 2, and 3, focus group participants said:
- a. Assignment-specific writing strategies were useful but not necessarily meaningful to the student writer because they did not transfer from teacher to teacher, or in other words, because instructor preferences varied widely from genre to genre;
 - b. Scholarly assignment instructions from year to year were sometimes over detailed and other times under detailed and both inhibited their growth as writers; and
 - c. Receiving too much writing support was just as bad as too little writing support.

Chapter 7

Synopsis of Findings

This chapter provides a synopsis of findings from this case study of learning to write assignments across this one Canadian baccalaureate nursing program. First, it was anticipated that students would discuss personal writing strategies or recall interesting aspects of learning to write assignments that (dis)connected to professional growth or perhaps reveal good/poor teaching instruction as students advanced through their degree program. Instead, I discovered a constellation of personal, political, relational, emotional, ideological, social, institutional, and philosophical dynamics that differed from year to year. Students suggested that developing social, relational, reflective, personal, writing, and communicative competencies were deemed equally important when developing their professional skills across all four years.

Students reported a desire for writing competency but attaining such competency was difficult for three reasons: (1) student writing needs differed as they advanced through the years; (2) students did not possess the linguistic ability to communicate their writing needs; and (3) students often encountered misunderstandings, miscommunication, and mixed messages regarding assignment instructions, marking criteria, and differing instructor expectations across the years. Findings suggested that learning to write the two genres under investigation, the scholarly paper and reflective journal, was enhanced by peer mentoring, trusted circles of academic and non-academic individuals such as librarians and professional nurses, strategic classroom discussion with student peers, family members, and the classroom instructor. The individual most important to learning to write across all four years was the classroom instructor because this person had professional nursing experience as well as authority to determine students' academic grades and approve students' year-end competency outcomes. Regardless of

year level, learning to write appeared to be hindered by instructor genre expectations, student reading deficiencies, personal writing disappointments/successes, unpredictable competition between peers in the classroom, and the dual task of having to perform within the required academic standards while also attempting to make sense of the disciplinary language and culture. Learning to write these genres was also limited by assignment design that was too detailed/too vague, feedback or writing commentary that was too detailed/too vague, evolving/devolving student writing development, and personal learning styles, assumptions, and motives towards learning scholarly and reflective writing assignments.

Second, there was a changing nature of learning to write across all four years in nursing. By changing nature, I mean students' writing practices, learning needs, and assignment support preferences changed from year to year. Generally, Year 1 students were generally open to learning how to write but felt confused and frustrated by conflicting tutor preferences for scholarly and reflective writing and students tended to carry this frustration across all four years; Year 2 students were generally resistant to writing supports, competitive in peer-to-peer relationships, held personal disappointments, and tended to repress their frustrations with the genre(s); Year 3 students were generally cohesive and well-connected to trusted individuals with whom they had on-going interactions throughout the writing process (e.g., close peers, health science librarians, writing tutors, and registered nurses from students' workplace); Year 3 students also tended to express and articulate their frustrations more diplomatically when talking about their writing experiences; and Year 4 students were generally cooperative in learning to write their assigned genres and were eager to complete their degree programs. If Year 4 students had differing perspectives on any given issue of the writing assignment, they tended to keep their thoughts, perspectives, and frustrations to themselves and complied with what was asked of them.

Third, the study also identified students' and instructors' common concerns about learning to write across all four years. Those concerns included things like genre definitions, assignment marking guidelines, and developmentally appropriate in-class reading and writing supports. Participants were particularly concerned that current supports, curricular design, and classroom approaches to teaching genres did not enable students' to progressively move toward more rhetorically sophisticated writing demands as they advanced through the program.

Participating instructors made the following specific recommendations:

- Create component-specific marking guidelines;
- Reduce class size to accommodate pedagogical attention required for teaching students how to write assignments;
- Invite instructors to be a part of in- and out-of-class writing tutorial sessions so that a content expert is in the room when students are learning to write the assignment; and
- Redesign the scholarly paper assignments in years 1 and 2 to focus on learning how to read nursing literature and practice the skill of summarizing nursing literature.

Participating students across all four years offered these specific recommendations:

- Year 1: provide templates for students' peer feedback; define and repeat often the definition and meaning of evidence-informed practice; explain the general marking guidelines throughout the year and with each assignment;
- Year 2: if assignment-specific marking guidelines are given to students, ensure they are consistent with general marking guidelines; repeat often the definition of scholarly, reflection, and primary nursing research; invite the instructor to be a part of in- and out-of-class writing tutorial sessions so that a content expert is in the room when students are learning to write;

- Year 3: provide debrief sessions after the assignment is due; provide help with reading research articles that is developmentally appropriate for *upper-level* nursing students; provide assignment-specific marking guidelines that are appropriate for nursing students who are *experienced* with writing scholarly and reflective genres;
- Year 4: when assignments have linked components, provide component-specific marking expectations; encourage Year 3 and 4 students to mentor first- and second-year students; mentoring enables students to teach younger students how to write and in turn enables learning to write by teaching it.

Finally, participants' perspectives and suggestions may be unique in that this was a case study of baccalaureate nursing at one Canadian university with a small number of participants, whose experiences of learning/teaching to write assignments may have depended on the sole context of this one university.

Chapter 8

Limitations

This section briefly considers limitations of this case study with regard to the research design and theoretical framework.

Research Design

The qualitative nature of this case study and the small sample from a single nursing baccalaureate program meant the findings cannot be generalized to other baccalaureate nursing programs. Findings can be compared to other case studies of undergraduate writing, discipline-specific academic writing, or writing in nursing. As a primary doctoral research project, time and resource constraints influenced the entire research process. A larger sample size, full-scale project, or longitudinal study would allow for a more thorough analysis of participants.

While the findings indicated heterogeneity or changing patterns of learning to write across all four years, the findings presented in this thesis were not conclusive. The exploratory nature of this study created descriptive findings, meaning the study was limited to identifying, documenting, describing, and characterizing student and instructor experiences, perspectives, and perceptions of teaching/learning to write assignments across the nursing curriculum.

This case study nursing faculty is one of only two nursing baccalaureate programs in Canada to employ context-based learning (CBL) pedagogy in its curricular design. The other nursing program is at McMaster University in Ontario. The CBL context of learning may have directly, indirectly, and/or unintentionally influenced the research findings, and may render the case study as unique.

The number of participants was larger than anticipated, which made for a rich dataset. However, conducting interviews with this number of participants extended the analysis of

transcripts and interview notes to more than one year. Semi-structured questions with 24 semi-formal interviews and 15 informal interviews could have limited the categorical themes and patterns found in the dataset. Interviews with structured, formal interview questions (rather than semi-structured) would allow for uniform analysis context to context. Formal questions would also allow for an analytical consistency between participants, and/or allow for parallel comparison between categories, variables of interest, and participants.

Theoretical Framework

Rhetorical genre theory (RGT) seemed an appropriate ethnographic framework to undertake a qualitative, exploratory study of how students learn to write assignments in baccalaureate nursing. This theory was able to account for several categorical themes but had limits of being able to account for the relational-emotional aspects of learning to write assignments across this study's nursing curriculum. Nor could RGT account for philosophical tenets of norms, values, beliefs, attitudes, and anxieties of participants in the study.

Artemeva (2008) has argued that rhetorical genre theory cannot account for complicated social actions and philosophical tenets such as those found in this study (e.g., communicative misunderstandings between students and instructors, personal teaching/learning disappointments, or attitudinal perceptions between facilitator and learner). Therefore, Artemeva claimed the notion of genre as text, social action, or texts that function as social action should be expanded to include activity that operates within the rhetorical community of practice. Findings from this case study would encourage not just expanding notions of genre as social action or rhetorical community but deepening an understanding of text and social action as *relational*. Human relationships operate and function within nursing discourse and those relationships are *entangled* with expectations, intentions, personalities, histories, temperaments, attitudes, values, beliefs,

fears, and hopes. Combining RGT with phenomenological frameworks such as relational-culture theory (Jordan & Hartling, 2002; Hartling, 2008), theories of quantum entanglement, or theories of desirability may help to expand current notions of genre in writing studies and rhetorical genre research. Refining RGT or combining RGT with other frameworks would strengthen study inferences, implications, and conclusions.

Chapter 9

Recommendations

I was invited to present my study findings to the Faculty of Nursing Caucus on April 16, 2014. I closed that presentation by recommending that faculty focus on three things that can and do impede nursing students from learning to write assignments across the nursing curriculum: providing timely/specific feedback, improving student reading, and clarifying motives/expectations in assignment design. These three issues were discussed in the previous chapters of this thesis, so I will not expand them again here in this section. What I recommended to this study faculty was that these issues should be addressed *routinely* (not just once) because they fluctuate and change and affect the culture of teaching/learning in this faculty. After my presentation, three faculty instructors were very keen to organize workshops in two of these areas: feedback and student reading. I suggested to these three individuals that they create a dedicated series of workshops to help impact deeper and broader cultural change. I also encouraged them to start special interest groups, which would help to spread the wealth of information and expertise within the entire faculty.

I would like to make three additional recommendations tied directly to reducing students' and tutors' stress in the classroom and increasing emotional-relational capacity for teaching and learning genres that are important to this degree program. Collegial and collaborative conversations were an integral part of this faculty's philosophy, so the following recommendations are meant to start a conversation about ideas and solutions that can be experimented with, adapted, and adopted directly for learning writing assignments in the classroom. The first two recommendations encourage experimenting with unconventional partnerships or tools that can help attune teaching to the emotional side of learning and

strengthen relational bonds of trust and transparency in assessment-oriented degree programs like this one. The third recommendation is more pragmatic, suggesting that faculty appoint a writing liaison to address and identify undergraduate writing needs.

My first recommendation is to experiment with ways to involve undergraduate nursing students in faculty development. Give undergraduates a collaborative opportunity to engage with faculty decision-makers, especially about the pedagogical issues that arose in this study like feedback approaches and assignment design strategies, so that students can take some ownership in a program that is designed for self-directed learning. For instance, should the faculty offer a series of workshops on creating effective scoring guides or marking rubrics for scholarly paper assignments, then that workshop should also include students as part of the faculty development process. This doesn't mean that students should be present for the full workshop or that the entire series be open to students attending the workshop. However, the workshop should at some point include student voices and representation. Scoring guides and rubrics have a direct impact on the way undergraduates do and do not learn to write their assignments and several participating students, especially third-year students, had suggestions for improving feedback and scoring guides that are worth exploring. Students possess what I call insider-knowledge about nursing students' as learners and I suggest the faculty capitalize on that knowledge as a resource for faculty development.

Conceptually, this is andragogically co-constructing knowledge and ways of knowing in a community of practice that treats students as adult learners and experts on their own learning and expands knowledge-building into a relational realm where students and teachers mutually co-facilitate self-directed learning in the classroom. It could also set into motion a level of student-teacher collaboration not yet experienced in this undergraduate program, such as letting

down guarded attitudes, reducing competitive behaviours, and opening up honest discussion surrounding assessment and writing expectations. The intention should be to move student-faculty discourse toward a common language about writing assignments that both students and instructors can define and re-define and reconceptualize on an on-going basis. Doing so may relieve some of the interpersonal anxiety that undergraduates feel towards their instructors, course-related writing assignments, curricular culture, or perceived academic demands.

To help nurse educators learn more about collaborative practices with undergraduates, I would recommend reading a collection of case studies edited by Carmen Werder and Megan Otis (2010), *Engaging Student Voices in the Study of Teaching and Learning*. Werder and Otis curated 10 years of research that was coordinated by the Carnegie Academy for the Scholarship of Teaching and Learning (CASTL) and intended to strengthen teaching and learning in college and university classrooms. The contributing researchers were both students and instructors from small and large postsecondary institutions, including Elon University, Western Washington University, North Seattle Community College, and California State University-Long Beach, and Illinois State University. Undergraduates, graduates, and instructional staff addressed multifaceted dimensions of collaboration between students and teachers, such as how teachers should engage students directly in discussions about assignment design and feedback, to what extent to involve students, what can be gained by the collaboration, if it improved student learning, and how responsibilities should be shared with students.

My second recommendation is to adapt practices that other teachers find successful in their own classrooms and to be transparent with your students about what pedagogical approaches or strategies you are attempting to do and why. I'd like to illustrate this with a story or testimony from Patricia Owen-Smith, Professor of Psychology and Women's Studies at

Oxford College of Emory University (Palmer & Zajonc, 2010, pp. 157-160), experimented with unconventional methods to help reduce stress and enrich the student experience of learning course content and psychology discourse. Patricia said that about ten years ago, she noticed the mounting distress of Emory students on her campus. On teacher evaluation forms, students reported feeling alienated from their instructors, especially when they received poor feedback on assignments, and as a result, students disconnected and tuned out from learning core course subjects like psychology. Psychology instructors complained more and more that students were overly fatigued and competitive. Escalating complaints by students and instructors cyclically fed into each other and soon there was an overall unhealthy atmosphere for meaningful learning. In her classroom, Patricia wanted to connect with students on a more collegial level but didn't know how to go about it. Almost out of desperation, she contacted and joined a nation-wide, multi-institutional group of college teachers, program directors, and curriculum administrators who were experimenting with contemplative interventions (such as mind, body, spirit, soul, whole-being practices) to improve active learning and critical thinking in the classroom (Palmer & Zajonc, 2010).

Patricia took the first step toward reconnecting and tuning into the learning needs of her students by using what she called two very unusual classroom learning tools to restructure the format of her psychology course. She introduced music and meditation prior to beginning each lesson or lecture. Seven to nine minutes each class period, Patricia stood in front of her students with eyes closed listening to the music and practicing Tonglin, a meditative practice centred on deep breathing and conscious thinking of compassion and kindness. The music was intentionally meditative, soulful, and lyrical, to calm Patricia's frenetic academic pace and that of her students. The meditation was quiet and reflective. After several weeks, the students engaged in the

meditation activity with Patricia and by mid-semester students participated in authentic ways. Students started to meditate with their own style of relaxing music, wearing their own headphones, closing their eyes, and focusing intently on deep, calming breathing techniques; other students listened to Patricia's music but instead of meditating for those few minutes, chose to do a creative or artistic activity as they listened quietly and reflectively (she gives the example of students knitting scarves for charity). Patricia allowed the students the freedom to do any activity in these few minutes but it had to be quiet and reflective and prompt students to think only of compassion and kindness.

Patricia testified that these two unlikely tools of music and meditation in the college psychology classroom virtually changed the entire ethos of the class "from a group of individuals reluctantly gathered together for study to a community of friends and partners who were creating a space of introspection, quiet, and respect for the process of study and the development of self" (Palmer & Zajonc, 2010, p. 160). This became the platform Patricia was hoping for. By the end of the semester, Patricia's students reached a social, emotional, and relational capacity to connect interpersonally with the subject matter, and the students' classroom discourse and quality of writing went beyond Patricia's expectations. Although Patricia was quick to give all the credit to the music and meditation, I posit that the credit also goes to Patricia's leadership in utilizing these as tools in the college classroom. She consistently and reliably opened every lecture with music and meditation and didn't give in to student naysayers. Her leadership equally helped change the entire ethos and attitude of learning psychology.

I told this story to illustrate that any interpersonal relationship in the facilitation of learning is dependent upon the attitudinal quality of the relationship between the facilitator and the learner. Facilitating learning to write and writing to learn strategies in the nursing classroom

are punctuated with interdependent attitudes, beliefs, fears, assumptions, and expectations of writing. Students will struggle to connect writing to learning and learning to writing as they progress through their program. The conversations students have with each other, their tutor, and any other trusted individual regarding writing assignments are interdependent on connecting to self-directed learning, personal growth, and professional development. Perhaps music and meditation or another unlikely tool for the context-based, problem-based, or self-directed nursing baccalaureate classroom may also be worth experimenting with to help nursing students adjust to a profession that is demanding not only cognitively but also emotionally. See Appendix S for a brief annotation of three organizations, The Fetzer Institute, The Institute of HeartMath, and The Fawn Foundation, who each respectively conduct global education research about contemplative, integrative, and mindful methods to reduce students' stress and improve collaborative engagement, cooperative learning, and critical thinking in the classroom.

My third recommendation is to establish and appoint a nurse educator as a writing liaison, who can more generally facilitate or co-facilitate faculty development needs in the areas of undergraduate teaching, learning, writing, and reading. The writing liaison could partner or co-facilitate on a regular basis with other educators and specialists regarding student/faculty development. There are university-sponsored programs, specialists and researchers who can help identify and address faculty-based writing/learning needs, such as the Centre for Teaching and Learning and WAC programs. Online, there are nursing and writing programs across Canada and the U. S. that provide open access to all kinds of evidence-based tools and resources. For example, University of Minnesota's Writing Enriched Curriculum posts its on-going development of a nursing writing plan; University of Toronto's writing center provides thought-provoking guidelines for teaching with writing in nursing; Duke University's Thompson Writing

Program posts discussions about writing in nursing from their faculty fellowship program, which supports an interdisciplinary group of undergraduate teachers who develop and evaluate new approaches to teaching with writing to undergraduates in their discipline; and the University of Alberta's Writing Across the Curriculum program has a web portal for nursing-specific writing/teaching resources.

I would encourage the writing liaison to identify and address issues of undergraduate scholarly and reflective writing. A good place to start would be to define and characterize scholarly writing assignments, provide consistent and reliable feedback on scholarly assignments, and organize the structure/purpose of scholarly assignments across all four years of the BScN Collaborative Program. Other issues worth developing include:

- distinguishing for students the genre differences between reflective writing in the context of clinical courses and reflective writing in tutorial courses; each has their respective purpose-driven expectations ;
- creating assignment-specific scoring guides for each year level of scholarly papers and are also reader-friendly with short sentences, simple language; avoiding vague terms like *clear thesis*;
- developing peer-response workshops for undergraduates to help students provide peer feedback that is both constructive and developmental¹⁷; and

¹⁷ Peer-response workshops are lacking in the Anglo-Canadian university context. Helpful examples of peer-response workshops from American research-intensive universities are widely available online and directly accessible, for example, through university websites, such as University of Minnesota (<http://writing.umn.edu/tww/responding/peerworkshop.html>) and Purdue OWL (<https://owl.english.purdue.edu/owl/resource/712/1/>) or through video on YouTube Channels, such Texas A&M University (<https://www.youtube.com/channel/UCx4ZRP8E8UGV4poLm3HSeYQ>) and <https://www.youtube.com/watch?v=VCio7AbO3vo>).

- defining and characterizing scholarly writing in developmental stages for undergraduate nursing students, where each developmental stage of scholarly writing could be thought of as its own *distinct* genre that undergraduates must write as they develop through their BScN program.

Finally, the writing liaison could establish interpersonal, multi-modal peer-teaching supports that foster more honest, open, and transparent conversations among nurse educators about their individual experiences of classroom teaching. Instructors have their own set of personal and professional situations regarding student writing, reading, and feedback. It is critical that instructors at all levels can discuss their experiences in a way that ensures honesty and vulnerability and at the same time does not hinder placement, promotion, or tenure advancement. Teachers need a trustworthy environment in which to express their struggles and difficulties with teaching and student writing. Support groups, accountability partners, anonymous blogs, online discussion groups, and virtual hangouts are a few ways that faculty can create a trustworthy sharing environment that is also sustainable for the long-term.

There are few academic publications on building *trustworthy* faculty communities. However, I will mention two articles that may be worthwhile reading for my case study faculty because they underscore effective strategies for developing more cohesive faculty communities. Cox and Richlin (2004) discuss challenges and implications of building effective faculty learning communities from several different perspectives of university faculty and Steinert, Mann, Centeno, Dolmans, Spencer, Gelula, and Prideaux (2006) published a systematic review (1980 to 2002) of faculty development initiatives that contributed to teaching effectiveness in medical education.

Chapter 10

Future Research: Towards a Writing Resilience Theory

There were two findings that surprised me in my case study: the relational-emotional nature of writing and the self-disclosed reading deficiencies associated with learning to write assignments across all four years. First, my case study findings were imbued with emotional, relational, and philosophical underpinnings but I do not know why. Future directions for my research would include researching the etiology (causations) of relational-emotional issues in postsecondary writing-to-learn processes. To date, this case study research led me to discover several other fields of research, such as emotional intelligence (Goleman, 1995), social and emotional learning (SEL; Zins, Weissberg, Wang, & Walberg, 2004), emotional literacy and teacher identity (Zembylas, 2005), managing emotions in the dialogic classroom (Brookfield, 2006; Brookfield & Preskill, 2005), and an entire research field on emotionality and performance pedagogy.¹⁸

Researchers in the field of social work education broadened my view of socio-cultural writing theories (e.g., Bazerman, 2010; MacArthur, Graham, Fitzgerald, 2006) to consider the relational aspects of students' learning/writing process by using relational-cultural theory (Baker-Miller & Stiver, 1997; Hartling, 2008; Jordan, Walker, & Hartling, 2004), which looks at the influential characteristics associated with developing, maintaining, and evaluating contextualized

¹⁸ Emotional classroom culture, teacher emotions, and emotionality in education have been studied for more than a decade by Michalinos Zembylas, program director of educational studies at Open University in Cyprus, Megan Boler of the Ontario Institute for the Studies in Education (OISE) at the University of Toronto, and Norman Denzin at the University of Illinois-Urbana-Champaign. Denzin in particular (Schutz & Zembylas, 2011, pp. v-vi) called for studies that use critical pedagogy and center the investigation on the sociocultural and relational performance of emotions in the classroom. Pietro Boscolo, Steve Graham (Arizona State University), Joseph Zins (University of Cincinnati), Herbert Walberg (University of Illinois), and Daniel Goleman (Rutgers University) have respectively studied the emotional side of learning in primary education. Stephen Brookfield (University of St. Thomas, Minneapolis) studies the emotional side of learning in adult education.

relationships such as the student-teacher relationship and how that relationship can influence students' learning/writing in the classroom. One way to undertake future research may be through grounded theory methodology (Brown, 2002; 2012), which can describe and articulate complex, interrelated phenomena in a systematic way that lets the participants define the problem or concerns and also allows me the flexibility to develop and modify theory to see how and where it fits in the scholarly literature. This methodology helps me as a researcher to dissect the emotional side of learning with, by, and through writing assignments (Appendix T).

I would encourage postsecondary or higher education research to study the emotional side of learning/teaching in singular or comparative disciplinary contexts or with a view towards disciplinary-specific writing development (e.g., intellectual, professional, or communication skills), faculty development, or teacher identity (e.g., beliefs, perspectives, inequalities/injustices, moral/ethical practices, relationships with students, well being). Understanding the full complexities and dynamics of how students/teachers assimilate knowledge, acquire skills, explore new perspectives, meet diverse classroom challenges, and learn to think creatively and innovatively tend to evoke very strong feelings and are often masked by academic jargon. The importance of exploring such research can help teachers better respond to the emotional rhythms of student learning and how to respond to them along their academic journey because if left untreated students may well end their academic journey and decide to drop out.

Next, I was also surprised when students self-disclosed their reading difficulties. I had no intention of discussing reading with students, linking writing assignments to assignment readings, or including reading issues in the research design. I did not ask any interview questions about reading. However, when I gave students the opportunity towards the end of our interview to bring up any other issues, year 2, 3, and 4 student participants wanted to make sure that I

documented their reading challenges. Studies of reading in higher education tend to gravitate toward testing, first-year college student challenges, and postsecondary learners who speak English as a second language (ESL), perhaps because there was previous research that warranted these demographics as being vulnerable to college-level reading proficiencies.

However, the participants in my study who voluntarily disclosed their reading difficulties were A- and B-level students, male and female, and Anglo-Canadian speakers who appeared to be from middle- and upper-socioeconomic classes. Far too often I observed the bridled fury and frustration of instructors in my study (and I continue to observe in my own academic teaching environments) who said that students *don't read*. When, according to my study's student participants, they often *can't read* unfamiliar genres that are highly contextualized and written for a specialized audience. In general, there appears to be a broad area of unexplored territory regarding reading in higher education, including how undergraduates in the professional disciplines learn to read discipline-specific and professional literature. If such research is conducted in the fields of writing studies, writing centers, or higher education, scholars or graduate/postgraduate students may want to consider reading research from the field of library and information sciences, which has been studying the role of writing assignments, literacy trends, teaching, and instructional improvement in higher education for at least 20 years (e.g., Arnold, 1998; Houtman, 2010; Johnston & Webber, 2003; Rader, 1999; Zaborowski, 2008).

Overall, the challenging nature of writing caused me to think more deeply about how students learn to write the genres that are asked of them and paved the way for future theoretical research. Thanks to the findings from my case study, I was able to *describe* how students learned to write; however I still could not *explain* how students learned to write and lacked an answer to the primary research question of *how* students learn to write assignments. Although not intended

when I embarked on this study, I started to develop a theory to help explain *how* students learn to write assignments. It is a theory that I have called writing resilience theory. This theory proposes that students learn to write by being resilient to the challenges/opportunities, enablers/constraints, and adversities/successes of writing. Writing resilience is any personal strategy to overcome, adapt to, or recover from writing challenges or demands. My future research intends to collect more data to validate the theory, for instance, by investigating writing challenges such as those found in my doctoral case study. Although I am just beginning the theoretical development of writing resilience, I have started exploring the theory with my Year 1 findings. Appendix U shows a diagram, which I created to illustrate the variety of reflective writing experiences and challenges of Year 1 nursing students in my case study. The intent of the diagram is to guide my own future research and to stimulate other writing researchers to investigate how students overcome these challenges and what ways, if any, students can be/can learn to be resilient to these challenges when learning to write.

I recently learned how significant my writing resilience theory could be to understanding writing pedagogy in the professional disciplines. Earlier this year in February 2014, I organized and chaired a presentation panel called *Preparing for Professional Practice: Writing Pedagogies and Affective Complexities of Student Writing in Medicine, Nursing, and Clergy Education* at the Writing Research Across Borders conference in Paris, France. One of the panel members, Marilyn Oermann, Professor and Director of Evaluation and Educational Research at Duke University School of Nursing, reported preliminary findings from a systematic review of how writing is currently taught in pre-licensure and graduate nursing programs across the United States. Oermann mentioned that the Institute of Medicine's (IOM) 2010 report, *The Future of Nursing: Focus on Education*, recommended that by 2020, 80% of all employed nurses should

have at least a baccalaureate degree (IOM, 2010, p. 4). This forecast by the IOM has already put a strain on the enrollment capacity of baccalaureate programs all across the United States and Oermann foresees the strain affecting the writing-intensive curriculum currently in place. With such forces pushing in on (or more likely pushing out) the writing-to-learn/learning-to-write pedagogical structures, she was concerned about undergraduates' capacity or resiliency to respond to curricular writing challenges in light of such strains on baccalaureate programs. Another element of concern discussed on our panel was that of faculty development and instructional support for baccalaureate writing development and career preparation.

Chapter 11

Final Commentary: What I Learned

This section discusses what I learned as a researcher, teacher, and educator. When I embarked on this case study to explore how nursing students learn to write assignments across all four years of one undergraduate nursing program, I perhaps innocently thought that instructors and students would talk about how they taught and learned assignments like the reflective journal and scholarly paper. Instead, they talked about issues that revolved around the assignment without talking about writing the assignment itself. Students and instructors talked about a whole constellation of learning dynamics that were very relational, emotional, personal, and political. These dynamics were always moving and blending with one another. There was a inter-dependent connection between the writing assignment and the relationships that surrounded the writing assignment, shaping and being shaped by one another, blending and blurring with one another, as one genre (not separate genres). This is the beauty of its complexity.

As a researcher, I felt that this doctoral research project was a beautiful and rewarding experience. Students and instructors taught me so much and I often feel like the ocean is not deep enough to contain my gratitude for all that I learned from them. They quite literally changed the way I put my research into practice and I am the better for it. I put their testimonies and observations of learning writing assignments to the test in my own classes, in my tutoring sessions with students, and in my consultations with postsecondary instructors, and thus far, I have never been disappointed. I can empathize with students and instructors on a far more relational level because I can share the narrative experiences of what I learned from participants in this study.

During the research process, I had several rewarding experiences and I would like to mention three of them. First, one of the most rewarding outcomes of interviewing students was that they told me how much they learned about writing in nursing as a result of talking with me. They taught me that talking about writing assignments *after* the due date is just as important as talking about the writing assignment *before* the due date because students tend to keep thinking about the content long after the due date. They want to actively integrate writing and content into the classroom and to engage their writing content with their classroom instructor. Second, I could not have had a more rewarding experience than co-presenting findings with one student participant, Anita, at the national nursing conference. She did so well that after the presentation was over, she was being recruited for graduate studies by other researchers! Anita is now a registered nurse at one of Alberta's leading cardiac research clinics and she still keeps in touch with me about what she is learning as a professional nurse. Third, it was exceptionally rewarding to hear directly from faculty instructors about how much the findings helped them better understand their students' culture of learning to write. One participating instructor is co-authoring two articles in process, one on first-year student writing (submitted to an academic nursing journal) and the other is on the changing nature of learning to write across all four years of baccalaureate nursing (Chaudoir, Lasiuk, & Trepanier, 2016).

Additionally, there were two extensions of my doctoral research. First, a longitudinal study of one baccalaureate nursing student is currently in progress and supervised by me. One first-year male nursing student who participated in the informal focus group volunteered to record every writing assignment across all four years of his baccalaureate program. He wanted to create a self-study of his own writing assignments because he was not expecting his nursing program to be so writing-intensive and wanted to learn just how much writing he actually did

across four years. Two years of preliminary results show that he has written more than 120 assessed and non-assessed writing assignments in 18 courses (required/elective nursing clinical, lab, tutorial, placements, and non-nursing courses). We intend to explore the genres in each of his courses and synthesize samples of his writing, and/or conduct interviews about how he learned to write these assignments.

Second, according to the University of Alberta's Undergraduate Research Initiative (URI) Committee, I am the only known PhD candidate at the university to supervise URI-funded undergraduate research that was an expansion of my own doctoral research. I supervised a second-year undergraduate who completed the research in April, 2013, and he presented his findings at the Canadian Association of the Schools of Nursing (CASN) conference in Vancouver (Chenier, 2013). Under my supervision, the purpose and scope of Chenier's research was to explore the experience of reflective journal writing of male baccalaureate students and their perceptions of gender-related activities in writing assignments. We were specifically interested in male nursing students' reflective journal experiences and their implicit/explicit writing expectations, identification with gender in nursing, and what they learned about becoming a nurse through the reflective writing assignment. The objective was to document questions posed by male students about reflective journaling with a view toward better understanding the role of reflective writing in academic success.

As a teacher, I have applied three very tangible lessons to my own teaching regarding assignment design and classroom talking. I learned that assignment design and classroom talking were powerful enablers and/or constraints because they actually connected or disconnected the students from the relational-emotional capacity to write the assignment for personal and

professional growth. Such capacities are important because they can either build up students' assurance and confidence or tear it down through feelings of blame and disappointment.

Regarding assignment design, I learned that text matters. By text, I mean the written and oral assignment instructions and assessment details shared with students before they began to write the assignment. I learned that over/under-detailed assignment instructions were certainly challenging when learning to write but not the primary problematic concern of participants in this case study. Students' most problematic concern of assignment design was that the instructor could not explain the assignment details; the result was that students felt disconnected from any comprehensive understanding of what was expected of his or her scholarly or reflective writing. Students in my study said that some explanations were informative but usually limited in the scope of writing knowledge. This was sort of the double-bind of classroom talking.

Regarding classroom talking, I learned to just listen more and talk less. I listen more attentively to student voices and their perspectives of learning to write assignment. That takes patience and requires honing my language and psychology skills to break their respective language codes. For instance, students will make excuses but excuses can be a cover up for deeper writing issues that they just don't want to reveal, like reading deficiencies or learning disabilities that have hampered them since primary school. The other thing I have learned is that students, especially in lower years, lack the linguistic ability to articulate their own learning needs. Students have difficulty communicating their actual learning needs even to those who want to help them, like teaching assistants, librarians, and writing tutors.

In my classroom, I like to think of talking as a generative process, not as generating ideas but as generating (un)predictable stages of student development. I have learned to think of talking in more Vygotskian ways, using talking to generate the interdependent relationship

between language and intellectual, personal, and professional development. I have found it a great privilege to witness how talking can actually change a students' relationship with their own intellect and professional growth. Talking is also a generative process of validation. Students often need their ideas, perspectives, arguments, sources, formatting, and so on, to be validated by someone they regard as important to their growth. Talking is a pedagogical space that can permit students to redefine and align themselves to disciplinary or instructional norms, values, and beliefs (despite an ill- or non-defined academic framework in which the learning functions) because in essence, the student is learning to redefine and align him/herself personally, intellectually, and developmentally. Talking is also the student's opportunity to think aloud, andragogically, learning to direct his or her own learning and develop *entwicklungsdrang*, which literally means the urge to develop. Talking can be constructive in that the student wants to acquire the knowledge and skill for personal edification not for performance or grade. My pedagogical aim for talking as a generative process is to reach into these kinds of constructive, validating, and interdependent relationships.

As an educator, I was taking one thing for granted in higher education. I assumed that undergraduates have (or can develop) the ability to apply learning to writing and apply writing to learning. I realize now that act of *learning to write* differs from the act of *writing* in highly emotional, relational, political, historical, personal, and professional ways. Writing is not the same as learning to write, just as teaching is not the same as learning to teach. Students who learn to write must do so socially and relationally, cooperating, competing, communicating, miscommunicating, misguiding, bumping up against one another, confusing, misaligning, and misleading one another. I learned that this is where most students live their academic lives. If I were honest, this is where I have lived my doctoral research life. I have learned to write my

doctoral thesis by overcoming challenges and embracing opportunities to write. Learning to write can be very entangled, which is why I have come to conclusion that learning to write can be difficult if not impossible to anatomize.

I close by noting that almost 30 years ago, Susan McLeod vividly described her observations of just how emotional writing and learning to write can be for college students (McLeod, 1987). She also observed just how little we study it in the field of postsecondary higher education research. There is a growing body of higher education and writing research that is addressing emotional, relational, and cultural aspects of postsecondary learning. I am included in that group of researchers (e.g., Anson, Horning, & Chaudoir, 2014; Chaudoir, 2014). Given what I have learned from my contemporaries and my own doctoral research, I am not so surprised that learning to write in baccalaureate nursing had such emotional overtones and that teaching students to write was so unpredictably subjective.

Learning to write in baccalaureate nursing consisted of narratives and subjective relationships. Learning was organic, changing from year to year. Writing was emotionally taxing on students and feedback was emotionally taxing on instructors. Scholarly writing in particular was challenging and frustrating, while at times scholarly writing flowed and came together. At the end of four years, this genre was filled with unresolved challenges, unanswered questions, hidden meanings and entangled with assumptive expectations that far too often constrained writing the genre well or teaching it well. Sometimes these things got in the way of learning to write assignments in nursing. Sometimes they harmonized. But they always shaped and were being shaped by interactive and interdependent relationships with students.

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Appendix A

University Research Ethics Board Notification of Approval

Notification of Approval

Date:	February 10, 2012
Study ID:	Pro00027966
Principal Investigator:	Susan Chaudoir
Study Supervisor:	Margaret Iveson
Study Title:	Learning Writing Assignments in the Faculty of Nursing Undergraduate Curriculum at the University of Alberta
Approval Expiry Date:	February 8, 2013
Approved Consent Form:	Approval Date Approved Document 2/10/2012 Information Letter and Informed Consent
Sponsor/Funding Agency:	SSHRC - Social Sciences and Humanities Research Council SSHRC

Thank you for submitting the above study to the Research Ethics Board 1. Your application has been reviewed and approved on behalf of the committee.

A renewal report must be submitted next year prior to the expiry of this approval if your study still requires ethics approval. If you do not renew on or before the renewal expiry date, you will have to re-submit an ethics application.

Approval by the Research Ethics Board does not encompass authorization to access the staff, students, facilities or resources of local institutions for the purposes of the research.

Sincerely,

Dr. William Dunn
Chair, Research Ethics Board 1

Note: This correspondence includes an electronic signature (validation and approval via an online system).

Appendix B

Faculty Notification of Administrative Approval



January 30, 2012

Ms. Susan Chadoir
PhD Candidate
Faculty of Nursing, UofA

Re: How nursing students learn the genres they are asked to write in their major field of study

Dear Susan:

Thank you for your interest in conducting your doctoral research with students and tutors in the 4 year BScN Collaborative Program at the Faculty of Nursing, University of Alberta. Further to our email correspondence, thank you again for the summary of your proposal and for the answers to my questions. I am pleased to inform you that you have administrative approval to carry out your study. This approval is subject to the following conditions:

- You receive ethical approval for your study by the Ethics Review Board and provide my office with a copy of the approval notice.
- You proceed with your proposed timelines as identified on page 1 of your research summary. Should these dates change please let me know as there are other studies in progress and I want to ensure there is no conflict.
- You work with the appropriate collaborative coordinators as appropriate re the nature of your study and the process to access tutors and students for the purpose of your study.

Please let me know if you accept the above conditions or if you have any questions we need to discuss. I can be reached at (780) 492-1597 or via email at joanne.profetto-mcgrath@ualberta.ca. Best wishes with your research study and I look forward to learning about your progress as you proceed and your findings when completed.

Sincerely,

A handwritten signature in black ink that reads "Joanne Profetto-McGrath".

Joanne Profetto-McGrath PhD, RN
Vice Dean & Professor

cc.: Gerri Lasiuk, PhD, RN – Doctoral Supervisor
Kaysi Kushner, PhD, RN – Associate Dean Undergraduate Programs
Carolyn Ross, PhD, RN – Assistant Dean Undergraduate Programs

Appendix C

Invitation to Participants



UNIVERSITY OF
ALBERTA

Interdisciplinary PhD Thesis Research Project *Writing assignments in the undergraduate nursing curriculum*

Principal Investigator: Susan Chaudoir, chaudoir@ualberta.ca, (780) 441-1423
 Co-supervisor: Professor Marg Iveson, Faculty of Education, marg.iveson@ualberta.ca, (780) 492-3658
 Co-supervisor, Professor Roger Graves, Writing Studies, graves1@ualberta.ca, (780) 492-2169
 FON Liason, Dr. Gerri Lasiuk, Faculty of Nursing, gerri.lasiuk@ualberta.ca, (780) 492-7557 (Mon-Wed)

March 2012

YOU ARE INVITED TO BE PART OF A STUDY OF HOW NURSING STUDENTS LEARN TO WRITE

This study is partially supported by SSHRC and part of a multi-institutional study of disciplinary writing assignments, and builds on previous research of FON writing assignments conducted by Dr. Roger Graves in the FON. I was the lead Research Assistant on that project. Dr. Gerri Lasiuk in the Faculty of Nursing presides as a member of my advisory committee for this study. Professor Joanne Profetto-McGrath and the University of Alberta Research Ethics Board have approved this study.

Who can participate?

Any instructor who teaches in the BScN Collaborative Degree Program during 6 week 2 (6W2) Winter 2012. Participation by instructors and students is voluntary.

Your participation will involve:

- allowing me to introduce this study to students in your tutorial group(s) to recruit their participation
- agreeing to involve your tutorial group(s) in peer writing groups offered by Writing Across the Curriculum
- giving me access to course writing assignment documents: syllabi, handouts, timelines, schedules, and any print and/or web-based materials you give the students about the assignment;
- allowing me to observe in-class writing instruction and out-of-class peer writing groups and tutorials;
- one focus group with the other participating instructors; and
- one or two semi-structured interviews: one at the beginning and one at the end of the course
 - each interview will be about an hour, at a convenient location and time for you
 - their focus will be : (a) on-going feedback of assignments (b) sequenced assignments; and (c) peer-group writing collaboration.

Potential benefits to you:

- enhanced understanding of how students learn to write in the discipline of nursing; and
- insight into your own teaching practices.

Potential risks to you:

- there are no known or anticipated harms associated with participating in this study and should not exceed those of a normal work day;
- all information gathered in this research is strictly confidential, and at no time will you or your students be identified; and
- you may withdraw, end, or modify your participation at any time, without penalty or consequence.

The findings from this study will help to identify:

- language/terms used to describe writing, tasks, and deliverables;
- discourse between instructors, students, and tutors about the assignment; and
- teaching/learning practices that contribute to the intended outcomes of the courses and degree program.

The anticipated findings will provide us with information about:

- students' and instructors' experience(s) on the teaching/learning of writing assignments;
- effectiveness of assigned genres; and
- specific areas for professional development.

Appendix D

Information Letter for Participants



UNIVERSITY OF
ALBERTA

Interdisciplinary PhD Thesis Research Project

Learning writing assignments in the undergraduate nursing curriculum

Principal Investigator: Susan Chaudoir, Interdisciplinary studies, chaudoir@ualberta.ca, (780) 441-1423
 Co-supervisor: Professor Marg Iveson, Faculty of Education, marg.iveson@ualberta.ca, (780) 492-3658
 Co-supervisor, Professor Roger Graves, WAC Director, graves1@ualberta.ca, (780) 492-2169
 FON Liason, Dr. Gerri Lasiuk, Faculty of Nursing, gerri.lasiuk@ualberta.ca, (780) 492-7557 (Mon-Wed)

INFORMATION LETTER FOR PARTICIPANTS

GOOGLE SITE: <https://sites.google.com/a/ualberta.ca/writing-in-nursing>

Background

This letter is an invitation to take part in a research interview for my proposed PhD thesis study. I am the principal investigator of this research and this study will be a partial fulfillment of the requirements for my doctorate of philosophy in interdisciplinary studies (education and writing studies). My intent is to advance nursing education and writing studies research, theory, and practice by documenting the teaching and learning of student writing in nursing education.

Purpose

The purpose of my study is to answer this question: how do nursing students learn the assignments they are asked to write in their major field of study? I will focus on the descriptions of the assignments to identify the expectations and concerns of instructors as they create their writing assignments and the experiences of students as they attempt to write the assignments in response to the writing prompts. I am specifically interested in your experience with: (1) communication of assignments; (2) feedback of assignments; (3) peer group writing collaboration; and (4) the ways this activity helps students learn more complex or sophisticated writing demands of the nursing curriculum.

Study Procedures

I would like to interview instructors and students, observe in-class writing instruction and out-of-class peer group writing collaboration, and analyze writing assignment texts to document the ways students learn how to write academic writing assignments in the FON. I would like to interview instructors and students who wish to share their experiences of teaching and learning to write in nursing, and if you agree to volunteer for an interview, I will meet with you for at least one interview that will last for no more than one hour. We can meet at a mutually determined location that is most convenient for you. With your permission, the interview may involve follow-up contact requiring additional time. The interviews are semi-structured, meaning they will start with one or two questions (that can be disclosed in advance) and move to an open conversation about learning to write as a nursing professional.

With your permission, I will be audio recorded and transcribed. The digital audio files will be securely retained in my locked office and available only to me. Transcriptions can be reviewed by you for accuracy and reliability, upon your request, before the analysis stage begins. All information that you share with me will be confidential and anonymous, unless specifically requested by you. Identification and personal information will be coded, secured, and encrypted in my locked office, and you will not be identified by name in any presentation, publications, correspondence, or meetings. Information collected during the interview may be used for academic publications in the form of journals articles, books, presentations, workshops, and/or seminars. I will certainly make any published research available to you and other participants of this study.

Benefits

The potential benefits of participating in this study include an opportunity to:

- enhance the FON's understanding of how nursing students learn to write in the discipline of nursing;
- inform specific areas of instructional strategies and development regarding writing assignments and student collaboration in the FON; and
- offer personal, professional, and academic perspective of content-based tutorial instruction and collaborative group writing support provided by the University of Alberta.

The benefits to scholarship include the potential to:

- inform curricular and pedagogical strategies in the undergraduate nursing curriculum;
- explore theoretical models of disciplinary writing activity in content-based writing instruction; and
- contribute to a deeper understanding of disciplinary writing in postsecondary education and nursing education.



UNIVERSITY OF
ALBERTA

Interdisciplinary PhD Thesis Research Project
Learning writing assignments in the undergraduate nursing curriculum

Principal Investigator: Susan Chaudoir, Interdisciplinary studies, chaudoir@ualberta.ca, (780) 441-1423
Co-supervisor: Professor Marg Iveson, Faculty of Education, marg.iveson@ualberta.ca, (780) 492-3658
Co-supervisor, Professor Roger Graves, WAC Director, graves1@ualberta.ca, (780) 492-2169
FON Liaison, Dr. Gerri Lasiuk, Faculty of Nursing, gerri.lasiuk@ualberta.ca, (780) 492-7557 (Mon-Wed)

Risk

I have an established history (4 years) with the FON instructors and students as a tutor and writing assignment research assistant with the Writing Across the Curriculum program. This is a low risk study, with semi-formal interviews, where the relationship of benefits is typically higher than the risk of participation. However, there may be risks to being in this study that are not known. If I learn of anything during this stage of the research that may affect you or your willingness to continue being in the study, I will tell you right away. Other potential risks may involve the sharing of personal perspectives of teaching and learning assigned tasks or sensitive disciplinary information about the FON.

Voluntary Participation

You are under no obligation to participate in this study. Your participation is completely voluntary. This means that you are participating through their own free will, and not being coerced in any manner by me or any other member of the FON. With each encounter, I will remind and assure you that you are not required to answer every question or respond to every subject. You are free to withdraw without consequence at any time before research analysis begins by indicating your wishes to me, and can ask to have any collected data withdrawn from the study. Even if you agree to be in the study you can change your mind and withdraw without consequence at any time before research analysis begins.

Confidentiality & Anonymity

My study team includes four (4) members: me, the principal investigator, my PhD thesis co-supervisors, Dr. Margaret Iveson and Dr. Roger Graves, and the Faculty of Nursing liaison, Dr. Gerri Lasiuk, who is also a member of my PhD advisory committee. Each member of the study team will adhere to the General Faculties Council's ethical standards and guidelines of the research by the Research Ethics Board at the University of Alberta, as well as the protocols and standards of practice set by the Faculty of Nursing. They have complied with the highest standards of professional practice and ethical conduct in accordance with the University of Alberta standards for the protection, privacy, and confidentiality by signing a confidentiality agreement.

I will be the only member of the study team who will interview you and have direct access to your records. The principal purpose of this study is to partially fulfill the requirements for my doctorate of philosophy in interdisciplinary studies. All information that you share with me will be confidential and anonymous, unless specifically requested by you. The only exception to this promise of confidentiality is that I am legally obligated to report evidence of abuse or neglect. To preserve your anonymity, I will not use your name during the interview or on the transcripts. You will only be identified by a pseudonym. Records will be kept for a minimum of five (5) years, and any identifying information will be coded, secured, encrypted, and protected by a password known only to me. You will not be identified in any presentation, publications, correspondence, or meetings unless you wish to be. Information collected during the interview may be used for academic publications in the form of journals articles, books, presentations, workshops, and/or seminars. I will certainly make any published research available to you and other participants of this study and notify you by email and/or in person. You may also request the information from me at any time by email and/or in person. I have no plans to destroy the information because there is value in retaining this information for documentary case study purposes. I may use the information from this study in future research. If I do, then the research will be approved by the Research Ethics Board at the University of Alberta.

Further Contact Information

My study was approved and adheres to the ethical standards and guidelines of the research with human participants by the Research Ethics Board at the University of Alberta. My study was also approved by the Vice Dean of Faculty of Nursing. For questions regarding participant rights and ethical conduct, contact the Research Ethics Office at (780) 492-2615.

For any questions that relate directly to this study, please do not hesitate to contact any one of us on the study team:

- Principal Investigator, Susan Chaudoir, PhD Candidate, chaudoir@ualberta.ca, (780) 441-1423
- Co-Supervisor, Professor Marg Iveson, Faculty of Education, marg.iveson@ualberta.ca, (780) 492-3658
- Co-Supervisor, Professor Roger Graves, WAC Director, graves1@ualberta.ca, (780) 492-2169
- FON Liaison, Dr. Gerri Lasiuk, Faculty of Nursing, gerri.lasiuk@ualberta.ca (780) 492-7557 (Mon-Wed)

Appendix E

Participant Consent Form



UNIVERSITY OF
ALBERTA

Interdisciplinary PhD Thesis Research Project
Writing assignments in the undergraduate nursing curriculum

Principal Investigator: Susan Chaudoir, Interdisciplinary studies, chaudoir@ualberta.ca, (780) 441-1423
Co-supervisor: Professor Marg Iveson, Faculty of Education, marg.iveson@ualberta.ca, (780) 492-3658
Co-supervisor, Professor Roger Graves, WAC Director, graves1@ualberta.ca, (780) 492-2169
FON Liason, Dr. Gerri Lasiuk, Faculty of Nursing, gerri.lasiuk@ualberta.ca, (780) 492-7557 (Mon-Wed)

CONSENT FORM

Study Title: *Learning writing assignments in the undergraduate curriculum of the Faculty of Nursing*

Do you understand that you have been asked to be in a research study?	Yes	No
Have you had an opportunity to ask questions and discuss this study?	Yes	No
Do you understand the benefits and risks involved in taking part in this study?	Yes	No
Do you understand who will have access to your information?	Yes	No
Do you understand that you are free to refuse to participate or withdraw from the study at any time without consequence and that your information will be withdrawn at your request?	Yes	No
Do you understand that interviews/group observations will be recorded and transcribed and a copy of that transcription will be made available to you?	Yes	No
Do you request your interview to remain anonymous?	Yes	No
Do you wish to be identified with a pseudonym?	Yes	No
Do you consent to the interview being used for potential future research?	Yes	No
Do you want to be notified when the researcher publishes or presents the study?	Yes	No
Do you wish to participate in disseminating results, e.g., publishing, presentation?	Yes	No
Do you consent to the researcher contacting you by email, even after this research study has ended? Please provide email(s) where indicated below.	Yes	No
Do you consent to using the University of Alberta's official communication services provided by Google® (e.g., Documents, Calendars, Sites, Groups)?	Yes	No
Have you read and received a copy of the attached Information Letter	Yes	No
Have you received your own copy of this signed consent form?	Yes	No

This study has been explained to me by the principal investigator, Susan Chaudoir, and I agree to take part in this study.

Signature of research participant Date Witness

Printed name of research participant Email contact of research participant

I believe that the person signing this form understands what is involved in the study and voluntarily agrees to participate.

Signature of investigator Date Printed name of investigator

Appendix F

List of Questions to Help Researcher Prepare for Interviews



UNIVERSITY OF
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Interdisciplinary PhD Thesis Research Project

Learning writing assignments in the undergraduate nursing curriculum

Principal Investigator: Susan Chaudoir, Interdisciplinary studies, chaudoir@ualberta.ca, (780) 441-1423

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Starter Questions to Prepare for Semi-structure Interviews and Focus Groups

For Instructors

- What do you perceive as writing in nursing? How do you create that in your assignments?
- How do you differentiate academic and professional writing in nursing?
- How do you construct the instructions and tasks for your assignments?
- What are your expectations of student writing in nursing?
- How do you communicate your writing assignments to students? How many modes of communication do you use (e.g., eClass, lecture, handouts, email, etc.)? How many venues do students have to talk about the assignments with you or the tutor (e.g., WAC lectures, peer-group writing sessions)?
- In what ways do you allow students work collaboratively to accomplish the tasks (e.g., respond to a case scenario) and deliverables (e.g., scholarly paper)?
- What are your thoughts on alternative writing assignments?

For Students

- What do you perceive as writing in nursing and in your course assignments? Do those genres connect?
- How do you differentiate academic and professional writing in nursing? Or are they the same?
- What are your experiences with the instructions and tasks for your assignments?
- How do you get your writing instructions? Where? How many modes of communication do you use (e.g., eClass, lecture, handouts, email, class, peers)?
- How many venues do you use to accomplish the tasks and deliverables? (e.g., WAC lectures, peer-group writing sessions, self-selected peer groups)?
- What are your thoughts on alternative writing assignments?
- In what ways do the explicit writing assignment lectures and peer-group writing sessions help you? Confuse you?
- What kinds of writing support help you/hinder you when trying to learn your assignment?
- What do you think about the peer-group writing collaboration?

For the Writing Tutor

- What kinds of assignments do you facilitate in your tutoring sessions?
- How do you interpret the assignment prompt for the nursing students?
- How do you communicate/facilitate/interpret the assignment task during your tutoring sessions?
- What strategies do you use to teach/collaborate the assignment to the nursing students?
- In what ways do you allow students work collaboratively to accomplish the tasks (e.g., respond to a case scenario) and deliverables (e.g., scholarly paper)?

Appendix G

Conversation Starters for Student Interviews

Some conversation-starters for STUDENTS:

1. Tell me what you experienced as you attempted to learn and write your assignment
 - a. Tell me what you experienced?
 - b. What worked? What didn't work?
 - c. What anything particularly hard/easy? What made it hard/easy?
 - d. What parts made sense, were helpful, or confusing?
 - e. What could your instructor do to make it easier or be more helpful?
2. Your feedback about trying to learn to write the assignment
 - a. Your questions? Your frustrations? Your likes and dislikes?
3. What **are** you learning about writing the assigned genre(s) in nursing?
 - a. What will transfer with you when you advance into next year?

Can you share any comments on the following?

- a) **Documents and support materials**
 - a. handouts, eClass, or class discussion?
- b) **Feedback from others**
 - b. Who did you seek help from? (peers, librarian, C4W, writing tutorials)
- c) **Instruction about the writing assignment**
 - c. How would you improve teaching/learning the assignment?
- d) **Self-selected methods to complete the writing assignment**
 - d. Where did you get stuck? How did you get through it?

Appendix H

Year 1 Assignment Marking Description

Assignment Marking Descriptions for NURS XXXX Nursing Practice I

These descriptions should be used as appropriate for the presentations and for the submitted assignments as indicated by (P for presentation) or (R for written submission) respectively.

Outstanding ≥ 90%	Extraordinary and creative expressive ability demonstrated in development and presentation of ideas. Solid structure. Very well organized. Consistently identifies salient theoretical argument(s) and ideas throughout. Outstanding integration of theoretical and/or empirical knowledge with own ideas. Objective application of evidence and reasons to support conclusions. Outstanding creative and/or imaginative presentation; excellent pace of delivery; clear and easy to hear/understand vocal expression (P). Grammatical presentation and spelling require minimal revision (R). APA format requires minimal revision (R).
Excellent ≥ 80%	Excellent expressive ability demonstrated. Well structured and organized. All relevant ideas are identified. Creative and thorough integration of theoretical and/or empirical knowledge with own ideas about all key concepts. Accurate interpretation of evidence, statements, graphics and questions related to the topic. Thoughtfully evaluates major alternative points of view. Draws warranted conclusions. Excellent creative and/or imaginative presentation; very good pace of delivery; clear and easy to hear/understand vocal expression (P). Grammatical presentation and spelling require minimal revisions (R). APA format requires minimal revision (R).
Very Good ≥ 70%	Sound expressive ability evidenced. Structure and organization appropriate. Identifies most key ideas. Integrates most relevant theoretical and/or empirical knowledge with own ideas. Accurate interpretation of evidence, statements, graphics, and questions related to the topic. Identifies most key ideas. Describes major alternative points of view. Justifies conclusions appropriately. Creative and/or imaginative presentation; good pace of delivery; clear and easy to hear/understand vocal expression (P). Grammatical presentation requires some revision (R). APA format requires some revision (R).
Good ≥ 60%	Generally well expressed. Some specific areas regarding structure and/or organization require improvement. Some key ideas identified. Integration of theoretical and/or empirical knowledge with own ideas is evident in the identification of key ideas only. Identifies alternate points of view. Explanation of assumptions and reasons for conclusions is inadequate. Offers some relevant supporting information for ideas. Draws conclusions. Significant elements of creative and/or imaginative presentation; good pace of delivery; mostly clear and understandable vocal expression (P). A few incorrect grammatical structures and spelling errors evident(R). APA format requires some revision(R).
Satisfactory ≥ 50%	Acceptably expressed. Several specific areas regarding structure and/or organizational need improvements. Identifies a few key ideas. An attempt to integrate theoretical and/or empirical knowledge with own ideas is evident but attempts to integrate theoretical knowledge are unclear or biased. Little evidence of evaluation of alternative points of view. Information is incomplete or superficial. There is little evidence of analysis or evaluation of alternative points of view – therefore conclusions drawn are inadequately supported. Some elements of creative and/or imaginative presentation; satisfactory pace of delivery; clear and understandable vocal expression (P). Several incorrect grammatical structures and spelling errors are present (R). APA format is inconsistently followed throughout the paper(R).
Pass ≥ 45%	Relevant content is present. There is a lack of structure and organization. One to very few key ideas identified. Poor integration of theoretical and/or empirical knowledge with own ideas. Little evidence of analysis – accuracy is questionable. No alternative points of view are evident. Justifies a few conclusions with superficial explanation of reasons. Would benefit from creative and/or imaginative presentation; delivery would benefit from a more appropriate pace (not too slow, not too fast); vocal expression would benefit from greater clarity (P). Several incorrect grammatical structures and spelling errors are present(R). Minimal evidence of APA format (R).
Fail < 45%	Organization of ideas is inadequate. Scope of ideas is inadequate. No discussion of theoretical ideas. Misinterprets evidence, statements, graphics, questions, etc. Draws unwarranted or fallacious conclusions. Expression demonstrates inability to carry out assignment directions. Information superficially addressed. Ignores obvious alternative points of view. Requires creative and/or imaginative presentation; pace of delivery inappropriate (too fast or too slow); vocal expression difficult to understand in places (P). Grammar and format of paper are poorly done (R). Paper is plagiarized (0) or not handed in (0) (R). Many grammatical and spelling errors (R). Minimal evidence of APA format (R).

Appendix I

Year 1 Template: Student Learning Plan

NURSING PROGRAM

Learning Plan

Name: _____

Date: _____

Complete a learning plan for the nursing practice competencies you have chosen to focus on this week. Learning objectives should include a description of the expected outcome. Evaluate your learning before beginning your practice for the next clinical week.

Strengths and areas to work on in my practice:

Learning Objectives	Learning Activities	Evaluation
<i>What do I want or need to learn in relation to knowledge, skills, attitudes, or values and how will I know that I have learned?</i>	<i>What or who can help me learn what I want to learn? What will I do to meet my objectives?</i>	<i>What evidence (from self, peers, tutors, staff & clients) do I have that I have met my learning objectives?</i>

Adapted with permission from CARNA

Why are these learning objectives important to your practice?

Did the opportunity to work on these nursing practice competencies make a difference to your practice? If so, please describe

Adapted with permission from CARNA

Appendix J

**GRADUATE COMPETENCIES AND
YEAR-END OUTCOMES
CONDENSED VERSION**

██████████

Based on the *Condensed Version of CARNA Entry-to-Practice Competencies for the Registered Nurses Profession 2006* (NEPAB,2008) and on the *Entry-to-Practice Competencies for the Registered Nurses Profession* (CARNA, 2006)

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Approved: ██████████

**Numbers in parenthesis represent CARNA Competencies*

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**Numbers in parenthesis represent CARNA Competencies*

OVERARCHING COMPETENCY STATEMENT

All students practice in a manner consistent with:

- CARNA Nursing Practice Standards (2003) and all other CARNA standards and guidelines
- CNA Code of Ethics for Registered Nurses (2008)

PROFESSIONAL RESPONSIBILITY AND ACCOUNTABILITY

Demonstrates professional conduct, practices in accordance with the *CARNA Nursing practice Standards*, the *CNA Code of Ethics for Registered Nurses* and legislative requirements, and demonstrates that the primary duty is to the client to ensure consistently safe, competent, ethical registered nursing care.

YEAR 1	YEAR 2	YEAR 3	YEAR 4
1.1 (Professional qualities and attributes) With assistance demonstrates attributes of: accountability and responsibility, beginning confidence and self awareness, a professional image, initiative, collaboration with the care team and participation in professional activities (1-3-4-6-19) *	1.2. (Professional qualities and attributes)With minimal assistance demonstrates attributes of: accountability and responsibility, beginning confidence and self awareness, a professional image, initiative, collaboration with the care team and participation in professional activities. (1-3-4-6-19)	1.3 (Professional qualities and attributes) With guidance demonstrates attributes of: accountability and responsibility, beginning confidence and self awareness, a professional image, initiative, collaboration with the care team and participation in professional activities. (1-3-4-6-19)	1.4 (Professional qualities and attributes) Independently demonstrates attributes of: accountability and responsibility, beginning confidence and self awareness, a professional image, initiative, collaboration with the care team and participation in professional activities. (1-3-4-6-19)
2.1 (Critical thinking and problem solving) With assistance demonstrates skills and judgment in critical thinking re: new knowledge, the organization of workload and time management. (7-9-10)	2.2 (Critical thinking and problem solving) With minimal assistance demonstrates skills and judgments in critical thinking re: new knowledge, the organization of workload and time management. (7-9-10)	2.3 (Critical thinking and problem solving) With guidance demonstrates skills and judgments in critical thinking re: new knowledge, the organization of workload and time management. (7-9-10)	2.4 (Critical thinking and problem solving) Independently demonstrates skills and judgments in critical thinking re: new knowledge, the organization of workload and time management. (7-9-10)
3.1 (Professional accountability and responsibility for safe practice) With	3.2. (Professional accountability and responsibility for safe practice) With	3.3 (Professional accountability and responsibility for safe practice) With	3.4 (Professional accountability and responsibility for safe practice)

*Numbers in parenthesis represent CARNA Competencies

<p>assistance understands, promotes, and enacts all aspects of safe practice for self, clients and others, including awareness of limits and professional duty to report. (1-2-8-10-12-13-14-15-16)</p>	<p>minimal assistance understands, promotes, and enacts all aspects of safe practice for self, clients and others, including awareness of limits and professional duty to report. (1-2-8-10-12-13-14-15-16)</p>	<p>guidance understands, promotes, and enacts all aspects of safe practice for self, clients and others, including awareness of limits and professional duty to report. (1-2-8-10-12-13-14-15-16)</p>	<p>Independently understands, promotes, and enacts all aspects of safe practice for self, clients and others, including awareness of limits and professional duty to report. (1-2-8-10-12-13-14-15-16)</p>
<p>4.1 (Promoting excellent and healthy workplaces) With assistance promotes a healthy culturally competent work environment, including the use of basic conflict resolution strategies and the critical assessment, application, evaluation and improvement of protocols, policies and procedures. (5-8-11-17-18)</p>	<p>4.2 (Promoting excellent and healthy workplaces) With minimal assistance promotes a healthy culturally competent work environment, including the use of basic conflict resolution strategies and the critical assessment, application, evaluation and improvement of protocols, policies and procedures. (5-8-11-17-18)</p>	<p>4.3 (Promoting excellent and healthy workplaces) With guidance promotes a healthy culturally competent work environment, including the use of basic conflict resolution strategies and the critical assessment, application, evaluation and improvement of protocols, policies and procedures. (5-8-11-17-18)</p>	<p>4.4 (Promoting excellent and healthy workplaces) Independently promotes a healthy culturally competent work environment, including the use of basic conflict resolution strategies and the critical assessment, application, evaluation and improvement of protocols, policies and procedures. (5-8-11-17-18)</p>

KNOWLEDGE-BASED PRACTICE

A. Specialized Body of Knowledge

Draws on diverse sources of knowledge and ways of knowing, which includes the integration of nursing knowledge along with knowledge from the sciences, humanities, research, ethics, spirituality, relational practice and critical inquiry.

YEAR 1	YEAR 2	YEAR 3	YEAR 4
<p>5.1 (Knowledgeable in) With assistance develops a knowledge base about current health care issues and challenges, including relevant related knowledge of: occupational health and safety, community development and population health, global and community health and safety, primary care and population health. (20-23-24-27-31)</p>	<p>5.2. (Knowledgeable in) With minimal assistance develops an increasing knowledge base about current health care issues and challenges, including relevant related knowledge of: occupational health and safety, community development and population health, global and community health and safety, primary care and population health. (20-23-24-27-31)</p>	<p>5. 3. (Knowledgeable in) With minimal guidance develops an increasing knowledge base about current health care issues and challenges, including relevant related knowledge of: occupational health and safety, community development and population health, global and community health and safety, primary care and population health. (20-23-24-27-31)</p>	<p>5. 4 (Knowledgeable in) Has a knowledge base about current health care issues and challenges, including relevant related knowledge of: occupational health and safety, community development and population health, global and community health and safety, primary care and population health. (20-23-24-27-31)</p>
<p>6.1 (Knowledgeable in) With assistance develops a knowledge base about current population and health care research, nursing and</p>	<p>6.2 (Knowledgeable in) With minimal assistance develops an increasing knowledge base about current population and health care research,</p>	<p>6..3 (Knowledgeable in) With minimal guidance develops an increasing knowledge base about current population and health care research,</p>	<p>6. 4 (Knowledgeable in) Has a knowledge base about current population and health care research, nursing and health informatics and</p>

**Numbers in parenthesis represent CARNA Competencies*

health informatics and information communication technology. (28-32)	nursing and health informatics and information communication technology. (28-32)	nursing and health informatics and information communication technology. (28-32)	information communication technology. (28-32)
7.1 (Knowledgeable in) With assistance develops a knowledge base about growth and development of persons, groups, communities and populations. (21-24)	7.2 (Knowledgeable in) With minimal assistance develops an increasing knowledge base about growth and development of persons, groups, communities and populations. (21-24)	7.3.(Knowledgeable in) With minimal guidance develops an increasing knowledge base about growth and development of persons, groups, communities and populations. (21-24)	7. 4 (Knowledgeable in) Has a knowledge base about growth and development of persons, groups, communities and populations. (21-24)
8.1 (Knowledgeable in) With assistance develops a knowledge base of the health sciences: physiology, pathology, pharmacology, epidemiology, genetics, immunology. (22)	8.2 (Knowledgeable in) With minimal assistance develops an increasing knowledge base of the health sciences: physiology, pathology, pharmacology, epidemiology, genetics, immunology. (22)	8.3. (Knowledgeable in) With minimal guidance develops an increasing knowledge base of the health sciences: physiology, pathology, pharmacology, epidemiology, genetics, immunology. (22)	8.4 (Knowledgeable in) Has a knowledge base about health sciences: physiology, pathology, pharmacology, epidemiology, genetics, immunology. (22)
9.1 (Knowledgeable in) With assistance develops a knowledge base of the social sciences and humanities, including theoretical and practical knowledge of relational practices foundational to nursing care. (25-26)	9.2. (Knowledgeable in) With minimal assistance develops an increasing knowledge base of the social sciences and humanities, including theoretical and practical knowledge of relational practices foundational to nursing care. (25-26)	9.3. (Knowledgeable in) With minimal guidance develops an increasing knowledge base of the social sciences and humanities, including theoretical and practical knowledge of relational practices foundational to nursing care. (25-26)	9.4 (Knowledgeable in) Has a knowledge base about social sciences and humanities, including theoretical and practical knowledge of relational practices foundational to nursing care. (25-26)
10.1 (Evidence informed practice) With assistance accesses, critiques and uses research in care with colleagues; collaborates and participates in knowledge development to support current, competent, safe care and practice. (26-28-29-30-33-34)	10.2. (Evidence informed practice) With assistance accesses, critiques and uses research in care with colleagues; collaborates and participates in knowledge development to support current, competent, safe care and practice. (26-28-29-30-33-34)	10.3 (Evidence informed practice) With minimal guidance accesses, critiques and uses research in care with colleagues; collaborates and participates in knowledge development to support current, competent, safe care and practice. (26-28-29-30-33-34)	10.4 (Evidence informed practice) Independently accesses, critiques and use research in care with colleagues; collaborates and participates in knowledge development to support current, competent, safe care and practice. (26-28-29-30-33-34)

**Numbers in parenthesis represent CARNA Competencies*

KNOWLEDGE – BASED PRACTICE

B. Competent Application of Knowledge

Demonstrates competence in the provision of nursing care. The competency statements in this section are grouped into four areas (Ongoing-holistic assessment; Collaborates with clients to develop plans of care; Provides registered nursing care, and; Ongoing evaluation of client care). While the presentation of these competency statements appears linear in nature, the actuality of providing nursing care reflects a critical inquiry process that embraces all competency statements.

1: On-going Holistic Assessment - Incorporates critical inquiry and relational practice to conduct an organized and comprehensive assessment that emphasizes client input and the determinants of health.

YEAR 1	YEAR 2	YEAR 3	YEAR 4
11.1 (Client engagement) With assistance reduces effect of positional power and personal bias while actively engaging the client in holistic, capacity-based assessment and goal setting. (36-40-41)	11.2 (Client engagement) With minimal assistance reduces effect of positional power and personal bias while actively engaging the client in holistic, capacity-based assessment and goal setting. (36-40-41)	11.3 (Client engagement) With minimal guidance reduces effect of positional power and personal bias while actively engaging the client in holistic, capacity-based assessment and goal setting. (36-40-41)	11.4 (Client engagement) Independently reduces effect of positional power and personal bias while actively engaging the client in holistic, capacity-based assessment and goal setting. (36-40-41)
12.1. (Critical thinking) With assistance uses anticipatory planning, analyzes and interprets data and collaborates with the health team during on-going assessment of the client's actual and potential health status and identification of their needs, capacities and goals. (35-38-39-42)	12.2. (Critical thinking) With minimal assistance uses anticipatory planning, analyzes and interprets data and collaborates with the health team during on-going assessment of the client's actual and potential health status and identification of their needs, capacities and goals. (35-38-39-42)	12.3. (Critical thinking) With minimal guidance uses anticipatory planning, analyzes and interprets data and collaborates with the health team during on-going assessment of the client's actual and potential health status and identification of their needs, capacities and goals. (35-38-39-42)	12.4 (Critical thinking) Independently uses anticipatory planning, analyzes and interprets data and collaborates with the health team during on-going assessment of the client's actual and potential health status and identification of their needs, capacities and goals. 35-38-39-42)
13.1 (Tools and techniques) With assistance uses appropriate, comprehensive assessment tools and information systems to assess clients and manage nursing and health care data, complying with agency policies and protocols and completing assessments in a timely manner. (35-37-43-44-45)	13.2 (Tools and techniques) With minimal assistance uses appropriate, comprehensive assessment tools and information systems to assess clients and manage nursing and health care data, complying with agency policies and protocols and completing assessments in a timely manner. (35-37-43-44-45)	13.3 (Tools and techniques) With minimal guidance uses appropriate, comprehensive assessment tools and information systems to assess clients and manage nursing and health care data, complying with agency policies and protocols and completing assessments in a timely manner. (35-37-43-44-45)	13.4 (Tools and techniques) Independently uses appropriate, comprehensive assessment tools and information systems to assess clients and manage nursing and health care data, complying with agency policies and protocols and completing assessments in a timely manner. (35-37-43-44-45)

**Numbers in parenthesis represent CARNA Competencies*

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KNOWLEDGE-BASED PRACTICE

B. Competent Application of Knowledge

Demonstrates competence in the provision of nursing care. The competency statements in this section are grouped into four areas (Ongoing-holistic assessment; Collaborates with clients to develop plans of care; Provides registered nursing care, and; Ongoing evaluation of client care). While the presentation of these competency statements appears linear in nature, the actuality of providing nursing care reflects a critical inquiry process that embraces all competency statements.

2: Collaborates with Clients to Develop Plans of Care

Plans nursing care appropriate for clients within the context of critical inquiry, relational and caring approaches. Draws on knowledge from nursing, health sciences and other related disciplines as well as knowledge from practice experience, clients' knowledge and preferences, and factors within the health-care setting, including client and staff safety, when developing plans of care.

YEAR 1	YEAR 2	YEAR 3	YEAR 4
14.1 (Client management) With assistance minimizes positional power and promotes client ownership by involving clients in identifying preferred outcomes, exploring care alternatives and accessing appropriate resources. (48-51-52-53-55)	14.2 (Client management) With minimal assistance minimizes positional power and promotes client ownership by involving clients in identifying preferred outcomes, exploring care alternatives and accessing appropriate resources. (48-51-52-53-55)	14.3 (Client management) With guidance minimizes positional power and promotes client ownership by involving clients in identifying preferred outcomes, exploring care alternatives and accessing appropriate resources. (48-51-52-53-55)	14.4 (Client management) Independently minimizes positional power and promotes client ownership by involving clients in identifying preferred outcomes, exploring care alternatives and accessing appropriate resources. (48-51-52-53-55)
15.1 (Anticipatory planning skills) With assistance uses critical inquiry and principles of primary health care to anticipate: client health problems, client and staff safety and concerns and the need for consultation with the client and team to promote continuity of care and manage complex problems. (46-47-49-50-54-55-56)	15.2 (Anticipatory planning skills) With minimal assistance uses critical inquiry and principles of primary health care to anticipate: client health problems, client and staff safety and concerns and the need for consultation with the client and team to promote continuity of care and manage complex problems. (46-47-49-50-54-55-56)	15.3 (Anticipatory planning skills) With guidance uses critical inquiry and principles of primary health care to anticipate: client health problems, client and staff safety and concerns and the need for consultation with the client and team to promote continuity of care and manage complex problems. (46-47-49-50-54-55-56)	15.4 (Anticipatory planning skills) Independently uses critical inquiry and principles of primary health care to anticipate: client health problems, client and staff safety and concerns and the need for consultation with the client and team to promote continuity of care and manage complex problems. (46-47-49-50-54-55-56)

**Numbers in parenthesis represent CARNA Competencies*

KNOWLEDGE-BASED PRACTICE

A. Competent Application of Knowledge

Demonstrates competence in the provision of nursing care. The competency statements in this section are grouped into four areas (Ongoing-holistic assessment; Collaborates with clients to develop plans of care; Provides registered nursing care, and; Ongoing evaluation of client care). While the presentation of these competency statements appears linear in nature, the actuality of providing nursing care reflects a critical inquiry process that embraces all competency statements.

3: Provides Registered Nursing Care

Uses multiple sources of knowledge (from nursing science, health sciences and other related disciplines, practice knowledge, clients' knowledge and preferences, and factors within the health-care setting) to consistently provide individualized nursing care for people of all ages and genders across a variety of settings (acute, continuing and community) in situations related: - health promotion, prevention and population health; - altered health status including acute and chronic health conditions and rehabilitative care; - hospice, palliative, and end-of-life care.

YEAR 1	YEAR 2	YEAR 3	YEAR 4
16.1 (Safety) With assistance performs effectively in rapidly changing situations; applies principles of safety to all aspects of preventive, supportive, diagnostic, therapeutic procedures and care. (61-62-71-72-73-75)	16.2 (Safety) With minimal assistance performs effectively in rapidly changing situations; applies principles of safety to all aspects of preventive, supportive, diagnostic, therapeutic procedures and care. (61-62-71-72-73-75)	6.3(Safety) With guidance performs effectively in rapidly changing situations; applies principles of safety to all aspects of preventive, supportive, diagnostic, therapeutic procedures and care. (61-62-71-72-73-75)	16.4 (Safety) Independently performs effectively in rapidly changing situations; applies principles of safety to all aspects of preventive, supportive, diagnostic, therapeutic procedures and care. (61-62-71-72-73-75)
17.1 (Prevention) With assistance incorporates principles of population health and engages prevention strategies when providing client care and promoting the health and safety of clients, groups, self and others. (63-70-71-72-73-74)	17.2 (Prevention) With minimal assistance incorporates principles of population health and engages prevention strategies when providing client care and promoting the health and safety of clients, groups, self and others. (63-70-71-72-73-74)	17.3(Prevention) With guidance incorporates principles of population health and engages prevention strategies when providing client care and promoting the health and safety of clients, groups, self and others. (63-70-71-72-73-74)	17.4 (Prevention) Independently incorporates principles of population health and engages prevention strategies when providing client care and promoting the health and safety of clients, groups, self and others. (63-70-71-72-73-74)
18.1 (Evidence-informed care) With assistance incorporates knowledge of current theory, best practice clinical guidelines, and research in carrying out decisions and implementing care. (57-58-71-74)	18.2 (Evidence-informed care) With minimal assistance incorporates knowledge of current theory, best practice clinical guidelines, and research in carrying out decisions and implementing care. (57-58-71-74)	18.3 (Evidence-informed care) With guidance incorporates knowledge of current theory, best practice clinical guidelines, and research in carrying out decisions and implementing care. (57-58-71-74)	18.4 (Evidence-informed care) Independently incorporates knowledge of current theory, best practice clinical guidelines, and research in carrying out decisions and implementing care. (57-58-71-74)

**Numbers in parenthesis represent CARNA Competencies*

<p>19.1 (Supportive centered care) With assistance provides culturally competent, client-centered care (during acute, chronic or palliative health challenges) that is supportive of and attends to client: development and role transition, decisions re health outcomes, informed choices re care, and the use of learning plans and strategies for promoting optimal health by accessing and building upon capacities and available resources. (59-60-64-65-66-67-68-69-75-76)</p>	<p>19.2 (Supportive centered care) With minimal assistance provides culturally competent, client-centered care (during acute, chronic or palliative health challenges) that is supportive of and attends to client: development and role transition, decisions re health outcomes, informed choices re care, and the use of learning plans and strategies for promoting optimal health by accessing and building upon capacities and available resources. (59-60-64-65-66-67-68-69-75-76)</p>	<p>19.3. (Supportive centered care) With guidance provides culturally competent, client-centered care (during acute, chronic or palliative health challenges) that is supportive of and attends to client: development and role transition, decisions re health outcomes, informed choices re care, and the use of learning plans and strategies for promoting optimal health by accessing and building upon capacities and available resources. (59-60-64-65-66-67-68-69-75-76)</p>	<p>19.4 (Supportive centered care) Independently provides culturally competent, client-centered care (during acute, chronic or palliative health challenges) that is supportive of and attends to client: development and role transition, decisions re health outcomes, informed choices re care, and the use of learning plans and strategies for promoting optimal health by accessing and building upon capacities and available resources. (59-60-64-65-66-67-68-69-75-76)</p>
<p>20.1 (Organization, skill and clinical judgment) With assistance recognizes, seeks help and assist in rapidly changing, unstable client situations. (61)</p>	<p>20.2 (Organization, skill and clinical judgment) With minimal assistance recognizes, seeks help and assist in rapidly changing, unstable client situations. (61)</p>	<p>20.3 (Organization, skill and clinical judgment) With guidance recognizes, seeks help and assist in rapidly changing, unstable client situations. (61)</p>	<p>20.4 (Organization, skill and clinical judgment).Independently recognizes, seeks help and assist in rapidly changing, unstable client situations. (61)</p>
<p>21.1 (Organization, skill and clinical judgment) With assistance manages multiple nursing interventions in complex and rapidly changing client situation. (62)</p>	<p>21.2 (Organization, skill and clinical judgment) With minimal assistance manages multiple nursing interventions in complex and rapidly changing client situation. (62)</p>	<p>21.3 (Organization, skill and clinical judgment) With guidance manages multiple nursing interventions in complex and rapidly changing client situation. (62)</p>	<p>21.4 (Organization, skill and clinical judgment) Independently manages multiple nursing interventions in complex and rapidly changing client situation. (62)</p>
<p>22.1 (Organization, skill and clinical judgment) With assistance provides knowledgeable, competent assistance to clients throughout all phases of diagnostic procedures and treatment processes. (75)</p>	<p>22.2 (Organization, skill and clinical judgment) With minimal assistance provides knowledgeable, competent assistance to clients throughout all phases of diagnostic procedures and treatment processes. (75)</p>	<p>22.3 (Organization, skill and clinical judgment) With guidance provides knowledgeable, competent assistance to clients throughout all phases of diagnostic procedures and treatment processes. (75)</p>	<p>22.4 (Organization, skill and clinical judgment) Independently provides knowledgeable, competent assistance to clients throughout all phases of diagnostic procedures and treatment processes. (75)</p>

**Numbers in parenthesis represent CARNA Competencies*

KNOWLEDGE-BASED PRACTICE

B. Competent Application of Knowledge

Demonstrates competence in the provision of nursing care. The competency statements in this section are grouped into four areas (Ongoing-holistic assessment; Collaborates with clients to develop plans of care; Provides registered nursing care, and; Ongoing evaluation of client care). While the presentation of these competency statements appears linear in nature, the actuality of providing nursing care reflects a critical inquiry process that embraces all competency statements.

4: On-going Evaluation of Client Care

Collaborates with clients and members of the health team-care team while conducting an on-going organized and comprehensive evaluation to inform future care planning.

YEAR 1	YEAR 2	YEAR 3	YEAR 4
23.1 (Evaluation) With assistance, in consultation with the client and health team, engages in timely, critical monitoring of the client's care outcomes, verifying client knowledge and skills, modifying and individualizing care as required. (77-78-79-80)	23.2 (Evaluation) With minimal assistance in consultation with the client and health team, engages in timely, critical monitoring of the client's care outcomes, verifying client knowledge and skills, modifying and individualizing care as required. (77-78-79-80)	23.3 (Evaluation) With guidance in consultation with the client and health team, engages in timely, critical monitoring of the client's care outcomes, verifying client knowledge and skills, modifying and individualizing care as required. (77-78-79-80)	23.4 (Evaluation) With guidance in consultation with the client and health team, engages in timely, critical monitoring of the client's care outcomes, verifying client knowledge and skills, modifying and individualizing care as required. (77-78-79-80)
24.1 (Documentation) With assistance provides concise, accurate, timely reports and documentation of care and it's evaluation. (81)	24.2 (Documentation) With minimal assistance provides concise, accurate, timely reports and documentation of care and it's evaluation. (81)	24.3 (Documentation) With guidance provides concise, accurate, timely reports and documentation of care and it's evaluation. (81)	24.4 (Documentation) With guidance provides concise, accurate, timely reports and documentation of care and it's evaluation. (81)

ETHICAL PRACTICE

Demonstrates competence in professional judgment and practice decisions by applying the principles in the *CNA Code of Ethics for Registered Nurses*, and the CARNA document *Ethical Decision-making-for Registered Nurses in Alberta: Guidelines and Recommendations* (2005). Engages in a critical inquiry process to inform clinical decision-making which includes both a systematic and analytical process along with a reflective and critical process. Establishes therapeutic, caring, and culturally competent relationships with clients and health-care team members based on appropriate boundaries and respect.

**Numbers in parenthesis represent CARNA Competencies*

YEAR 1	YEAR 2	YEAR 3	YEAR 4
<p>25.1 (Ethical competence) With assistance promotes a safe, ethical, caring environment for clients and colleagues characterized by: self-awareness, understanding of appropriate boundaries, competent relational practices and ability to use principled ethical reasoning. (82-83-84-85-91-96)</p>	<p>25.2. (Ethical competence) With minimal assistance promotes a safe, ethical, caring environment for clients and colleagues characterized by: self-awareness, understanding of appropriate boundaries, competent relational practices and ability to use principled ethical reasoning.(82-83-84-85-91-96)</p>	<p>25.3 (Ethical competence) With guidance promotes a safe, ethical, caring environment for clients and colleagues characterized by: self-awareness, understanding of appropriate boundaries, competent relational practices and ability to use principled ethical reasoning. (82-83-84-85-91-96)</p>	<p>25.4 (Ethical competence) Independently promotes a safe, ethical, caring environment for clients and colleagues characterized by: self-awareness, understanding of appropriate boundaries, competent relational practices and ability to use principled ethical reasoning. (82-83-84-85-91-96)</p>
<p>26.1 (Knowledgeable ethical practice) With assistance practices according to the <i>CNA Code of Ethics</i> including care for all persons, inclusive of culture and religious beliefs and based on knowledge and understanding of: ethical duties and legal rights, informed consent, client autonomy, advocacy and confidentiality. (83-86-87-88-89-90-91-92-93-94-95)</p>	<p>26.2 (Knowledgeable ethical practice) With minimal assistance practices according to the <i>CNA Code of Ethics</i> including care for all persons, inclusive of culture and religious beliefs and based on knowledge and understanding of: ethical duties and legal rights, informed consent, client autonomy, advocacy and confidentiality. (83-86-87-88-89-90-91-92-93-94-95)</p>	<p>26.3 (Knowledgeable ethical practice) With guidance practices according to the <i>CNA Code of Ethics</i> including care for all persons, inclusive of culture and religious beliefs and based on knowledge and understanding of: ethical duties and legal rights, informed consent, client autonomy, advocacy and confidentiality. (83-86-87-88-89-90-91-92-93-94-95)</p>	<p>26.4 (Knowledgeable ethical practice) Independently practices according to the <i>CNA Code of Ethics</i> including care for all persons, inclusive of culture and religious beliefs and based on knowledge and understanding of: ethical duties and legal rights, informed consent, client autonomy, advocacy and confidentiality. (83-86-87-88-89-90-91-92-93-94-95)</p>

SERVICE TO PUBLIC

Understands the concept of public protection and the duty to practice registered nursing in collaboration with clients and other members of the health-care team to provide and improve health-care services in the best interests of the public.

YEAR 1	YEAR 2	YEAR 3	YEAR 4
<p>27.1 (Team work) With assistance demonstrates skills for collaborative team work, team communication and development, including knowledge of the scope of practice of members and appropriate assignment, delegation and supervision of work within the team. (100-101-109)</p>	<p>27.2 (Team work) With minimal assistance demonstrates skills for collaborative team work, team communication and development, including knowledge of the scope of practice of members and appropriate assignment, delegation and supervision of work within the team. (100-101-109)</p>	<p>27.3 (Team work) With guidance demonstrates skills for collaborative team work, team communication and development, including knowledge of the scope of practice of members and appropriate assignment, delegation and supervision of work within the team. (100-101-109)</p>	<p>27.4 (Team work) Independently demonstrates skills for collaborative team work, team communication and development, including knowledge of the scope of practice of members and appropriate assignment, delegation and supervision of work within the team. (100-101-109)</p>
<p>28.1 (Knowledge of systems and change) With assistance uses</p>	<p>28.2 (Knowledge of systems and change) With minimal assistance</p>	<p>28.3 (Knowledge of systems and change) With guidance uses</p>	<p>28.4 (Knowledge of systems and change) Independently uses</p>

**Numbers in parenthesis represent CARNA Competencies*

knowledge of all levels of the health care system to: assess and improve organizational culture, promote culturally safe care, use established protocols within and across health care sectors, advocate for access to resources, and assess and promote effective change. (98-9-102-103-109)	uses knowledge of all levels of the health care system to: assess and improve organizational culture, promote culturally safe care, use established protocols within and across health care sectors, advocate for access to resources, and assess and promote effective change. (98-9-102-103-109)	knowledge of all levels of the health care system to: assess and improve organizational culture, promote culturally safe care, use established protocols within and across health care sectors, advocate for access to resources, and assess and promote effective change. (98-9-102-103-109)	knowledge of all levels of the health care system to: assess and improve organizational culture, promote culturally safe care, use established protocols within and across health care sectors, advocate for access to resources, and assess and promote effective change. (98-9-102-103-109)
29.1 (Knowledge of systems and change) With assistance supports planning and professional efforts for a healthier, safer society, including awareness of public health policy and emergency preparedness. (107-108-110)	29.2 (Knowledge of systems and change) With minimal assistance supports planning and professional efforts for a healthier, safer society, including awareness of public health policy and emergency preparedness. (107-108-110)	29.3 (Knowledge of systems and change) With guidance supports planning and professional efforts for a healthier, safer society, including awareness of public health policy and emergency preparedness. (107-108-110)	29.4 (Knowledge of systems and change) Independently supports planning and professional efforts for a healthier, safer society, including awareness of public health policy and emergency preparedness. (107-108-110)
30.1 (Occupational health and safety) With assistance applies principles of occupational health and safety to protect the public, the environment, clients, self and colleagues from all forms of injury or abuse; safely and effectively manages physical resources. (97-104-105-106)	30.2 (Occupational health and safety) With minimal assistance applies principles of occupational health and safety to protect the public, the environment, clients, self and colleagues from all forms of injury or abuse; safely and effectively manages physical resources. (97-104-105-106)	30.3 (Occupational health and safety) With guidance applies principles of occupational health and safety to protect the public, the environment, clients, self and colleagues from all forms of injury or abuse; safely and effectively manages physical resources. (97-104-105-106)	30.4 (Occupational health and safety) Independently supplies principles of occupational health and safety to protect the public, the environment, clients, self and colleagues from all forms of injury or abuse; safely and effectively manages physical resources. (97-104-105-106)

SELF – REGULATION

Demonstrates an understanding of professional self-regulation by developing and enhancing own competence, ensuring consistently safe practice, and ensuring and maintaining own fitness to practice.

YEAR 1	YEAR 2	YEAR 3	YEAR 4
31.1 (Self-regulation) With assistance understands the unique role and mandate of CARNA and the nursing profession as legislated and self-regulating. (111-112-113-114-115-116-117-118-119)	31.2 (Self-regulation) With minimal assistance understands the unique role and mandate of CARNA and the nursing profession as legislated and self-regulating. (111-112-113-114-115-116-117-118-119)	31.3 (Self-regulation) With guidance understands the unique role and mandate of CARNA and the nursing profession as legislated and self-regulating. (111-112-113-114-115-116-117-118-119)	31.4 (Self-regulation) Independently understands the unique role and mandate of CARNA and the nursing profession as legislated and self-regulating. (111-112-113-114-115-116-117-118-119)

**Numbers in parenthesis represent CARNA Competencies*

<p>32.1 (Self-regulation) With assistance assumes individual responsibilities for all aspects of professional-legal privilege and public trust by assessing and maintaining competence and fitness to practice. (111-112-113-114-115-116-117-118-119)</p>	<p>32.2 (Self-regulation) With minimal assistance assumes individual responsibilities for all aspects of professional-legal privilege and public trust by assessing and maintaining competence and fitness to practice. (111-112-113-114-115-116-117-118-119)</p>	<p>32.3 (Self-regulation) With guidance assumes individual responsibilities for all aspects of professional-legal privilege and public trust by assessing and maintaining competence and fitness to practice. (111-112-113-114-115-116-117-118-119)</p>	<p>32.4 (Self-regulation) Independently assumes individual responsibilities for all aspects of professional-legal privilege and public trust by assessing and maintaining competence and fitness to practice. (111-112-113-114-115-116-117-118-119)</p>
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CONTEXT- BASED LEARNING ([REDACTED] Program specific)

Demonstrate competency with the application of the elements of context-based learning in tutorial, laboratory and clinical experiences.

<p>33.1.1 With assistance, effectively use self-directed learning</p>	<p>33.2.1 With guidance, effectively use self-directed learning</p>	<p>33.3.1 Independently effectively use self-directed learning</p>	<p>33.4.1 Independently effectively use self-directed learning</p>
<p>33.1.2 With assistance, use critical thinking skills to facilitate learning of the group</p>	<p>33.2.2 With guidance, use the critical thinking skills to facilitate learning of the group</p>	<p>33.3.2 Independently use critical thinking skills to facilitate learning of the group</p>	<p>33.4.2 Independently use critical thinking skills to facilitate learning of the group</p>
<p>33.1.3 With assistance, effectively use group process to facilitate learning of the group</p>	<p>33.2.3 With guidance, effectively use group process to facilitate learning of the group</p>	<p>33.3.3 Independently effectively use group process to facilitate learning of the group</p>	<p>33.4.3 Independently effectively use group process to facilitate learning of the group</p>

**Numbers in parenthesis represent CARNA Competencies*

Appendix K

Sally's Philosophy and Student Expectations

[REDACTED] Collaborative Baccalaureate Nursing Program Nursing [REDACTED] Clinical Orientation

My Philosophy:

I believe that nursing education is a collaboration between the instructor, student, client, family and other health team/professional members. Teamwork is essential where we all have knowledge to share and we can all learn. In relation to context-based learning, I am your facilitator and guide. **It is your responsibility to be an active participant in your learning.** If you are unsure about anything please ask a staff member or me. It is better to have asked the question than to have wished you had.

Ethical nursing practice is our responsibility and we must uphold the CNA Code of Ethics for Registered Nurses and the CARNA Nursing Practice Standards.

1. Welcome & Introductions

Student Expectations	Tutor Expectations
Punctuality	Punctuality
Preparedness	Preparedness
Speak Clearly	Adherence to UofA regulations and course outline
Adherence to course outline	Respect and tolerance
Right to pass questions on	Email etiquette
Respect and tolerance	
Out of class learnings	
Email etiquette	
Code of Student Behaviour in UofA	
Calendar	

2. Tutor Information

Name: [REDACTED]

Contact information:

Pager: [REDACTED] (please give me 10-15 min to respond)

Office: [REDACTED]

Email: [REDACTED]

***Email is the best way to contact me. I look at emails from 0800-1630 Mon-Fri. Expect a turnaround response time of 24 hrs.**

3. Course Outline & Objectives

General overview

4. Placements

Rundle Elementary School
11005 – 34 Street
Phone: 780-471-6100

Be at the school by 0830h on clinical days. Please park on the street as there is not enough parking in the parking lot.

ORIENTATION TO SITE:

Wednesday January 11 at 0815

** Please note: check the following websites for information: Alberta Learning: Guide to Education 2010-2011, Alberta Health, and [REDACTED]

Garneau Hall
[REDACTED]

Be at the Hall by 0900h on clinical days

ORIENTATION TO SITE:

Friday March 8 – Group A and Group B at 0900

5. Post Conferences

Tuesdays
0800-0950
Rm: ECHA L1 - 131

Post conferences will include:

- Time for student feedback and sharing of ideas regarding clinical experience
- Discussion about upcoming assignments
- Group Work
- Deconstructing learning objectives
- Leadership Opportunities

6. Labs

Tuesdays
1200 - 1350
RM: ED 221

Remember! Prepare for lab in advance-see lab manual for readings and preparation
Be prepared to stay for the duration of the lab time

7. Other Information

Learning Plan (please use template)
 Reflection on Practice (please use template)
 Health Promotion Activities will discuss in detail

Learning objectives should not repeat course objectives, assignment objective or course expectations. Learning Objectives should follow SMART. Please read handout sent to you.

Unacceptable learning objectives include:

- I will be on time for clinical
- I will implement McGill questions of inquiry during my home visit
- I will communicate with seniors in the lodge
- I will make posters

We will discuss this in orientation and throughout the course. Please ask questions throughout.

8. Fixed Resource Sessions

Tuesdays
 1000-1150
 Rm: ECHA 2- 190

9. Home Visits

Times will be individually negotiated
 Home visits to commence on Week 2

The instructor will observe the 1st home visit.

10. Alternate Experiences

Please review timetable

11. Due Dates

Check Course Outline for details

12. Important Information

Tutor Recommendations
 Health Passports
 Security Clearances (should be on student at all times during clinical)
 Photo ID – visible at all times
 DRESS CODE – check eclass

*****Check eclass regularly for messages or changes**

13. eclass

Please check eclass for the following:

- U of A Policies and Information on:
 - Plagiarism and Cheating
 - Code of Student Behaviour
 - Policy Appropriate Clinical Attire
- Check your eclass at least twice a day for information

Absences

- **MUST CONTACT TUTOR AND AGENCY – ON FIRST DAY OF ABSENCE AND ON RETURN TO CLINICAL PRACTICE**
- May be required to have “make-up” clinical time.
- Unexcused absences (holidays, weddings etc) will be documented, no “make-up” time will be granted.

“Never regard study as a duty, but as the enviable opportunity to learn to know the liberating influence of beauty in the realm of the spirit for your own personal joy and to the profit of the community to which your later work belongs.”

-Albert Einstein

Appendix L**Sally's Student Profile Sheet****Nursing** 

Name:

From (City/Town):

Any previous post-secondary education?

Do you have other responsibilities? If yes, please describe,(so that I have an idea of your workload).

Write a statement of your vision of a great academic year, then, more specifically, of a great Nursing 191 experience.

Write two things that you can do to achieve your vision.


Write two things that I, as your tutor, can do to help you achieve your vision.

What are your general expectations of me as a Tutor?

How can I help you learn?

Appendix M

Sandra's Template for Reflective Summary of Clinical Shifts

 **FACULTY OF
NURSING**

REFLECTIVE SUMMARY OF CLINICAL SHIFTS

Student: _____ Date: _____

Tutor: _____

Setting learning objectives for each shift.

Ability to critically reflect on how each shift went.

What went well.

What could have been done differently.

Other Comments

Appendix N

Year 2 Scholarly Paper Marking Guide

FACULTY OF NURSING
NURSING SCHOLARLY PAPER MARKING GUIDE

Student Id # _____

Paper submitted on time: Yes No

Mark: _____

Marker: _____

Content (70%)	21 marks	
The Abstract accurately and clearly summarizes the paper.		/1
The Introduction includes a clear identification of the selected health condition including what is addressed in the following pages: <ul style="list-style-type: none"> • Forecasts what the reader can expect in the paper • Includes a thesis statement for the paper that connects with the assignment 		/2
Body of paper <ul style="list-style-type: none"> • Describes the disease, its prevalence and general overview of the impact of the disease on the individual. • Describes which aspect of self management is most difficult, and why this self management activity is important. • Introduces and describes the compliance theory/concept. • Introduces and compares either the adherence or concordance theory and identifies how it differs from compliance • Describes which is a better fit to guide nursing practice, in context and gives rationale for that decision • Provides specific and concrete examples of WHAT the nurse would do and HOW nurse would go about achieving this and WHY that goal and action is appropriate. (designs nursing care) 		/13
The conclusion includes a summary of key points. <ul style="list-style-type: none"> • Concluding statements reflect the student's ability to effectively draw personal conclusions from the information presented in the body of the paper 		/3

<p>References</p> <ul style="list-style-type: none"> • Appropriate & relevant articles are located. • The minimum of 6 references come from peer reviewed nursing or health discipline related journals. • References span the necessary period of time as required by the topic & focus 	/2
Organization/Style/APA (30%)	9 marks
<p>APA (6th edition) format used focusing on:</p> <ul style="list-style-type: none"> • Correct development of title page • Running Head and page numbering throughout paper • Correct formatting of abstract • Appropriately citing sources – both for paraphrasing and/or direct quotes • Correct development of the reference page 	/4
<p>Ideas are presented in a clear, concise manner, ideas progress logically</p>	/3
<p>Writing style is consistent throughout (i.e., active vs. passive voice, 1st or 3rd person, grammar/spelling, et cetera)</p>	/2
	<p>Total</p> <p>/30</p>

Appendix O

Year 2 General Guidelines for Evaluation of Scholarly Papers

General Guidelines for Evaluation of Scholarly Papers NURS ■ Nursing in Context B1

Outstanding 28,29,30	Extraordinary and creative writing ability demonstrated in development and presentation of ideas. Solid structure. Very well organized. Consistently identifies salient theoretical argument(s) and ideas throughout. Outstanding integration of theoretical and/or empirical knowledge with own ideas throughout the paper. Objective application of evidence and reasons to support conclusions. Appropriate generalizations in relation to the topic Consistent identification of salient arguments, including opposing points of view. Warranted, justified conclusions. Grammatical presentation and spelling require minimal revision. APA format requires minimal revision.
Excellent 26,27	Excellent writing ability demonstrated. Paper has structure and is well organized. All relevant ideas are identified. Creative and thorough integration of theoretical and/or empirical knowledge with own ideas about all key concepts. Accurate interpretation of evidence, statements, graphics and questions related to the topic. Thoughtfully evaluates major alternative points of view. Draws warranted conclusions. Grammatical presentation and spelling require minimal revisions. APA format requires minimal revision.
Very Good 24,25	Sound writing ability evidenced. Structure and organization of paper is appropriate. Identifies most key ideas. Integrates most relevant theoretical and/or empirical knowledge with own ideas. Accurate interpretation of evidence, statements, graphics, and questions related to the topic. Identifies most key ideas. Describes major alternative points of view. Justifies conclusions appropriately. Grammatical presentation requires some revision. APA format requires some revision.
Good 21,22,23	Generally well written .Some specific areas regarding structure and/or organization require improvement. Some key ideas identified. Integration of theoretical and/or empirical knowledge with own ideas is evident in the identification of key ideas only. Identifies alternate points of view. Explanation of assumptions and reasons for conclusions is inadequate. Offers some relevant supporting information for ideas. Draws conclusions. A few incorrect grammatical structures and spelling errors evident. APA format requires some revision
Satisfactory 18,19,20	Acceptably written. Several specific areas regarding structure and/or organizational need improvements. Identifies a few key ideas. An attempt to integrate theoretical and/or empirical knowledge with own ideas is evident but attempts to integrate theoretical knowledge are unclear or biased. Little evidence of evaluation of alternative points of view. Information is incomplete or superficial. There is little evidence of analysis or evaluation of alternative points of view – therefore conclusions drawn are inadequately supported. Several incorrect grammatical structures and spelling errors are present. APA format is inconsistently followed throughout the paper.
Pass 15,16,17	Relevant content is present. There is a lack of structure and organization within the paper. One to very few key ideas identified. Poor integration of theoretical and/or empirical knowledge with own ideas. Little evidence of analysis – accuracy is questionable. No alternative points of view are evident. Justifies a few conclusions with superficial explanation of reasons. Several incorrect grammatical structures and spelling errors are present. Minimal evidence of APA format.
Fail 0-14	Organization of ideas is inadequate. Scope of ideas is inadequate. Structure of paper is inadequate – parts are missing (e.g. Abstract). No discussion of theoretical ideas. Misinterprets evidence, statements, graphics, questions, etc. Draws unwarranted or fallacious conclusions. Writing demonstrates inability to carry out assignment directions. Information superficially addressed. Ignores obvious alternative points of view. Grammar and format of paper are poorly done. Paper is plagiarized (0) or not handed in (0). Many grammatical and spelling errors. Minimal evidence of APA format.

Appendix P

Year 3 General Guidelines for Evaluation of Scholarly Papers

General Guidelines for Evaluation of Scholarly Papers NURS ■ Nursing in Context C

<p>Outstanding</p> <p>28 - 29 - 30</p>	<p>Extraordinary and creative writing ability demonstrated in development and presentation of ideas. Outstanding integration of theoretical and/or empirical knowledge. Consistent identification of salient argument(s) throughout. Objective application of evidence and reasons to support warranted, justified conclusions and appropriate generalizations in relation to the topic. Grammatical presentation and APA format require minimal revision.</p>
<p>Excellent</p> <p>25 - 27</p>	<p>Excellent writing ability demonstrated. Paper has structure and is well-organized. Identifies relevant ideas. Creative and thorough integration of theoretical and/or empirical knowledge with own ideas. Thoughtfully evaluates alternative points of view. Draws warranted conclusions. Grammatical presentation and APA format require minimal revision.</p>
<p>Very Good</p> <p>21 - 24</p>	<p>Sound writing ability evidenced. Structure and organization of paper is appropriate. Integration of theoretical and/or empirical knowledge is evident. Accurate interpretation of evidence, statements, graphics, and questions related to the topic, allows for identification of most key ideas. Thoughtfully evaluates major alternative points of view. Justifies conclusions appropriately. Grammatical presentation and APA format require a few revisions.</p>
<p>Good</p> <p>18 - 20</p>	<p>Generally well written with a few specific areas regarding structure and/or organization requiring improvement. Integration of theoretical and/or empirical knowledge with own ideas is evident in the identification of key ideas. Identifies some alternative points of view. Offers some relevant supporting evidence for ideas. Draws conclusions. Explanation of assumptions and reasons for conclusions is attempted. A few incorrect grammatical structures and spelling errors evident. APA format requires some revision.</p>
<p>Satisfactory</p> <p>15 - 17</p>	<p>Acceptably written with several specific areas regarding structure and organization needing improvement. An attempt to integrate theoretical and/or empirical knowledge with own ideas is evident. Identifies a few key ideas, however information is incomplete and/or superficial. Little evidence of analysis or evaluation of alternative points of view. Draws a few conclusions. Explanation of assumptions and reasons for conclusions is inadequate. Several incorrect grammatical structures and spelling errors are present. A number of APA format errors occur throughout the paper.</p>
<p>Fail</p> <p>1 - 14</p>	<p>Writing demonstrates inability to fully carry out assignment directions. Organization and scope of ideas are inadequate. Poor integration of theoretical and/or empirical knowledge with own ideas. Little evidence of analysis or evaluation of alternative points of view. A few conclusions are drawn.. Justifies conclusions with superficial explanation of reasons or draws unwarranted or fallacious conclusions. Incorrect grammatical structures and spelling errors evident. Minimal evidence of APA format.</p>

Appendix Q

Year 4 General Guidelines for Evaluation of Scholarly Assignments

General Guidelines for Evaluation of Scholarly Assignments NURS ■ Nursing in Context D

Outstanding 44-45	Extraordinary and creative writing ability demonstrated in development and presentation of ideas. Solid structure. Very well organized. Consistently identifies salient theoretical argument(s) and ideas throughout. Outstanding integration of theoretical and/or empirical knowledge with own ideas throughout the paper. Objective application of evidence and reasons to support conclusions. Appropriate generalizations in relation to the topic. Consistent identification of salient arguments, including opposing points of view. Warranted, justified conclusions. Grammatical presentation and spelling require minimal revision. APA format requires minimal revision.
Excellent 39-43	Excellent writing ability demonstrated. Paper has structure and is well organized. All relevant ideas are identified. Creative and thorough integration of theoretical and/or empirical knowledge with own ideas about all key concepts. Accurate interpretation of evidence, statements, graphics and questions related to the topic. Thoughtfully evaluates major alternative points of view. Draws warranted conclusions. Grammatical presentation and spelling require minimal revisions. APA format requires minimal revision.
Very Good 33-38	Sound writing ability evidenced. Structure and organization of paper is appropriate. Identifies most key ideas. Integrates most relevant theoretical and/or empirical knowledge with own ideas. Accurate interpretation of evidence, statements, graphics, and questions related to the topic. Identifies most key ideas. Describes major alternative points of view. Justifies conclusions appropriately. Grammatical presentation requires some revision. APA format requires some revision.
Good 28-32	Generally well written. Some specific areas regarding structure and/or organization require improvement. Some key ideas identified. Integration of theoretical and/or empirical knowledge with own ideas is evident in the identification of key ideas only. Identifies alternate points of view. Explanation of assumptions and reasons for conclusions is inadequate. Offers some relevant supporting information for ideas. Draws conclusions. A few incorrect grammatical structures and spelling errors evident. APA format requires some revision.
Satisfactory 24-27	Acceptably written. Several specific areas regarding structure and/or organizational need improvements. Identifies a few key ideas. An attempt to integrate theoretical and/or empirical knowledge with own ideas is evident but attempts to integrate theoretical knowledge are unclear or biased. Little evidence of evaluation of alternative points of view. Information is incomplete or superficial. There is little evidence of analysis or evaluation of alternative points of view – therefore conclusions drawn are inadequately supported. Several incorrect grammatical structures and spelling errors are present. APA format is inconsistently followed throughout the paper.
Pass 22	Relevant content is present. There is a lack of structure and organization within the paper. One to very few key ideas identified. Poor integration of theoretical and/or empirical knowledge with own ideas. Little evidence of analysis – accuracy is questionable. No alternative points of view are evident. Justifies a few conclusions with superficial explanation of reasons. Several incorrect grammatical structures and spelling errors are present. Minimal evidence of APA format.
Fail 0-21	Organization of ideas is inadequate. Scope of ideas is inadequate. Structure of paper is inadequate – parts are missing (e.g. Abstract). No discussion of theoretical ideas. Misinterprets evidence, statements, graphics, questions, etc. Draws unwarranted or fallacious conclusions. Writing demonstrates inability to carry out assignment directions. Information superficially addressed. Ignores obvious alternative points of view. Grammar and format of paper are poorly done. Paper is not handed in (0). Many grammatical and spelling errors. Minimal evidence of APA format.

Appendix R

Year 4 Scholarly Assignment Marking Guide for Students

Faculty of Nursing

NURS [REDACTED]

Scholarly Assignment Marking Guide for Students

Total Weight = 45%

- Group Presentation = 20%
- Group Scholarly Paper = 15%
- Individual Reflection = 10%

Group Presentation Impression

On-going leadership/involvement/evidence of effective communication

Planning/organization/time management/equality of workload

Introductions of players/presentations/posters/Ppt/brochures

Individual strengths

Coherency/ transitions

Q&A – host discussion in group/participant interaction

Summary

References

Group Scholarly Paper

Content

Literature Analysis/evidence

Content Synthesis

Appendix S

Organizations that Research Stress in Classrooms

Fetzer Institute

The Fetzer Institute, a privately-funded foundation in Kalamazoo, Michigan, is dedicated to supporting research in higher education that focuses on any one or all of the following four areas: student social engagement and citizenship, integrated ways of knowing; academic life (curricular) and non-academic life (co-curricular); and the mental health crisis among college students. The Fetzer Institute has supported and continues to support educational leaders like Parker Palmer and his conference on integrative learning for compassionate action. Parker Palmer and Arthur Zajonc (2010, pp. 155-215), along with 15 other postsecondary faculty, program chairs, institute or program directors, fellows, college deans, and one president emeritus discuss how they explored transformational learning in three areas: the college classroom, beyond the classroom (i.e., community service and business internships), and through campus-wide initiatives. Examples include a fellowship program, community leadership, interdisciplinary arts, service learning opportunities, a physical education curriculum, clinical and medical education, faculty/staff relationships, president- and faculty-specific relationships, and campus-wide engagement in promoting cultural change, and represent a variety of institutional contexts, such as Duke University, Florida State University, Michigan State University, Spelman College, University of San Francisco, Prince George's Community College, Harvard Divinity School, and Vanderbilt University. Their respective testimonies are dialogues and strategies that resulted from a 2007 international conference, *Uncovering the Heart of Higher Education: Integrative Learning for Compassionate Action in an Interconnected World*, in San Francisco, February 22-25, 2007. For a brief synopsis, visit The Fetzer Institute's website

at <http://www.fetzer.org/resources/uncovering-heart-higher-education> or Palmer's WikiPODia page, <http://wikipodia.podnetwork.org/Home/topics-for-discussion/meaning-purpose-and-spirituality-in-higher-education>, and for a conference report, see http://www.contemplativemind.org/admin/wp-content/uploads/2012/09/uncovering_heart_highered_report.pdf.

Institute of Heartmath

Additional education research about contemplative, integrative, and mindful methods to improve collaborative engagement, cooperative learning, and critical thinking in the classroom learning can be found in the work from Rollin McCraty and Doc Childre from the Institute of Heartmath, an internationally recognized nonprofit research centre and educational organization in California that is dedicated to researching how emotions affect physiological states of being. They now have 23 years of research that specifically looks at emotional stress in educational settings and ways to help educators and students positively reduce stress and build psychophysiological resiliency to stressful situations (e.g., Bradley, McCraty, Atkinson, Tomasino, Daugherty, & Arguelles, 2010; McCraty & Childre, 2002; Ratanasiripong, Sverduk, Prince, & Hayashino, 2012).

The Hawn Foundation

The Hawn Foundation is dedicated to improving social and emotional development in primary school children based on neuroscience and positive psychology research. Their global headquarters is in Florida with worldwide offices in London, England, and Vancouver, British Columbia. Their research looks at models of cooperation, happiness, and optimism in stressful school situations. MindUP™ is a model co-created by the foundation's founder, Goldie Hawn, who spent 10 years meeting with leading neuroscientists and psychologists to educate herself on

children's health and well-being. Hawn later partnered with University of British Columbia's Kimberly Schonert-Reichl, who established the Child and Adolescent Development Lab in the Department of Educational and Counseling Psychology. Hawn and Schonert-Reichl's on-going international research evaluates the effectiveness of the CASEL accredited MindUP™ curriculum. Research results are disseminated through peer-reviewed scholarly publications, an online learning community designed specifically for educators to collaborate and share evidence-based practice, as well as for the public to view on the Hawn Foundation (e.g., Schonert-Reichl & Lawlor, 2010 and <http://thehawnfoundation.org>; for Canadian publications see an easy-read publication from Schonert-Reichl & Hymel, 2007; and scientific reports from Hymel, Schonert-Reichl, & Miller, 2006; Schonert-Reichl, Stewart-Lawlor, Oberle, & Thomson, 2009). The J. Erik Jonsson Community School website has blogs and videos tangibly showing how children perform these mindful models at school and home (see <http://brainchildblog.com>).

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Appendix T

My Understanding of Grounded Theory for Future Research

I did not go looking for grounded theory; rather grounded theory found me. Once I realized its tenets, challenges, advantages, and even limitations, I knew that I wanted to use grounded theory methodology in future research. What I like about grounded theory is that it yields findings based on thick descriptions of data and participant quotes (like my doctoral case study) and it reflects the participants' concerns, not mine. I include this appendix as a reminder to explore this methodology in my future research practice.

According to co-founders Barney Glaser and Alsem Strauss (Glaser, 1998; 2001), grounded theory methodology is suitable for researchers who seek to explain, describe, define, or characterize behavioural phenomena with data that are based on participants' lived experiences. Theory is grounded in the data and developed through categorical themes (e.g., the participants' concerns) that emerge from careful, consistent, and systematic analysis of the data. The theory is supposed to construct concepts, definitions, and propositions that present a systematic view of the phenomena, specifying relations among variables (Kerlinger, 1973, p. 9). The purpose of developing theory is to explain and predict the phenomena under study. The theory is legitimate when it can explain what happened, predict what will happen, and interpret what is happening in all categories and subsequent inquiries of the topic. Essentially, there are three criteria for fulfilling grounding theory research. First, the categories must fit or match appropriately with the theory; second, the theory must accurately explain the participants' primary concerns and how participants addressed or resolved their concerns; and third, the theory must be modifiable to future research while maintaining its accuracy of the current dataset.

Appendix U

Diagram to Illustrate Writing Resilience Theory & Year 1 Challenges

Year 1 students were asked: How did you learn to write the reflective journal?
 This diagram categorizes their replies. Writing resilience theory (mentioned in Chapter 10) was developed to help explain that students will learn to write the reflective journal by being resilient to these challenges.

