Finding the Truth by Telling Lies
Using Fiction Techniques to Integrate Nursing Experiences

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Remember that time you got off the late shift and went to Village Inn with you co-workers, and told stories
A 6-8 sentence story about a clinical experience that sticks in your craw/upsets you

Lastname1.doc

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Susie King Taylor
B 1848 Georgia “under the slave laws”
D 1912 Boston
Wrote *Reminiscences of My Life in Camp with the 33d United States Colored Troops, Late 1st S.C. Volunteers*

Start to write fictionalized version in 2014
Fiction Techniques have been used to integrate experiences

Pennebaker from SMU started using a technique of Directed Expressive Writing

Pt were directed to write for 15 minutes, 3 x week on a traumatic experience.
In a 1997 article Pennebaker listed positive results which included:

- Decreased visits to a medical provider
- Improved marker of stress and immunity
- Improved reports of stress and optimism

Expressive Writing has positive effect on:

• Physical/emotional distress & illness mgmt in early stage cancer (Gallo, Garrino, & De Monte, 2015)

• Sleep, pain and general physical and emotional s/s (Merz, Fox, & Malcarne, 2014)


There have also been some studies showing no effect but this represents the difficulty in measuring these variables (Zachariae & O’Toole, 2015)

Rita Charon from Columbia University pioneered Narrative Medicine in education of Medical Students.

She reports that this increases medical students empathy, listening skills and improve patient care.

Boykin and Shoenhoffer in their Theory of Caring said that the fundamental unit of knowledge for nursing is the “nursing situation” which can best be studied through story. (Boykin & Schoenhofer, 1991)

Caper 4 ways of knowing include *aesthetic knowledge*. This was reiterated by Chinn

(Chinn & Kramer, 2011)

Why Use Fiction?

the act of constructing stories is a natural human process that helps individuals to understand their experiences and themselves. This process allows one to organize and remember events in a coherent fashion while integrating thoughts and feelings. In essence, this gives individuals a sense of predictability and control over their lives. ...Constructing stories facilitates a sense of resolution...  (Pennebkaer & Seagal, 1999)

According to cognitive change theory, traumatic memories that are not simplified into a narrative structure may be stored as sensory perceptions, obsessional ruminations, or behavioral reenactments, as in the case of posttraumatic stress disorder (Danoff-Burg, Mosher, Seawell, & Agee, 2010).

In 2016, Started to work with University of Nebraska Medical Center College of Nursing to use fiction to integrate nursing experiences
Process

1. Story-chosen by student, shared in writing, projected on screen and read to peers in the room

2. Identify a meaningful point of the story.

3. Discussion on the story would proceed for 5-10 minutes.

4. The student writer gave reactions

5. Student to rewrite from point of view patient/family

6. Students were given 45 minutes to rewrite their story.

7. New story then projected next to original and discussed
Rules

1. Not all students are professional writers; only an active attempt at writing is expected.

2. It was expected that students will read other students’ stories and offer constructive feedback meant to be helpful and honest.

3. The student will incorporate the feedback from the class in their rewrites.
I have 3 experiences learning about refugees when one clinical day I walk into the room of a broken speaking 37-year-old male, from Sudan. I was able to ask him about his culture, his tribe, and connect on a very human level while I listened to his journey, his challenges and his triumphs.

It's touching on a spiritual level, when people's paths cross in such a way.
I have been trapped in this hospital room for days now. Nobody seems to understand me. Nobody is listening to me. They ask me all sorts of stupid questions, make me fill out silly fake forms, or ask me to do weird puzzles. All I want is to go home. Today, a student nurse came in. She was in no rush and she seemed to have no agenda. She simply wanted to know more about me and how I got here; to America or this hospital bed. For this first time in days, I felt like I could speak without exasperation.
Example 2

An individual that remember without difficulty is an geriatric man who did not want anyone around. He refused all care-meds, food bathing. I know I could be the one to reach him. I asked him to take a shower. He replied gruffly, “Not now.” He said nothing. I tried again in an hour. He said no. Then I said “How about we ambulate?” He said, “Why don’t you?” So I did.
77 days! And I am still here. No one visited me. Am I that big of a jerk? Hell, who gives a crap. Well I do need someone to approve these surgeries for me, since they won’t let me do it my damn self. But nobody wants to do that either. And what’s with all these damn nurses and doctors asking me to eat and shower, when I CLEARLY don’t want to!? I just want to get the hell out of here so I can go home and be left alone.
I’m still here after 77 days! And not a single person has visited me, am I really that bad of a person? Ah...who gives a shit, I don’t need anyone or anything! Well I do need someone to approve these surgeries for me, since they won’t let me do it my damn self. But nobody wants to do that either. And what’s with all these damn nurses and doctors asking me to eat and shower, when I CLEARLY don’t want to!? They already got this tube thingy in my stomach, feeding me baby food or whatever. Don’t they understand I just want to get the hell out of here so I can go home and be left alone.
I’ve been diagnosed with ulcerative colitis for years now and am in the hospital once again. My husband wants a divorce. Does he even know what I have been dealing with all these years? I do not want to be here in a hospital room screaming at one another either. I want him to bring me flowers, chocolates, and a teddy bear and tell me how we are going to get through this. I wish we could go back to the loving spouses we were before this ugly illness started tearing our marriage and my life apart
Noon, an unfamiliar nurse asks if he can take my vital signs. I tell him “only if you put me out of my misery”. Unfortunately, they don’t take suicide jokes very lightly if you’re in one for a failed attempt. I start to get annoyed because people are treating me different and I start to feel like an outsider. I have nothing left to lose so I threaten to hit him. If only that was the worse thing I’ve done today.
The death nurses are here again to ask if I’ve made any decisions. They tell me what options I have: be on this bi-pap 24/7 for the rest of my life or go without it and be comfortable but inevitably die from this illness. I have grandchildren that I love, but at the same time I am in so much pain and I can’t even get around on my own anymore. My family hardly comes to see me anymore anyway. I’m so tired.
Here comes another person in scrubs to tell me I can’t start treatment. They just waltz in, demand and leave. I just want to be alone, why won’t she leave? Doesn’t she know the drill? Demand and leave. She’s asking me what I want to accomplish today. I can’t remember the last time my voice mattered to someone here.