LEARNING GROUP PROCESS SKILLS

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A response to "Video: A teaching strategy for learning group process," by Beverly Anderson and Nina Hrycak

The authors of the article, Video: A teaching strategy for learning group process, are to be congratulated for their interest in teaching group process content, and for their willingness to experiment with a teaching strategy that incorporates videotape feedback. Too often practice in the theory and skills of group process is given minimal attention in both undergraduate and graduate nursing curricula. Yet, as faculty we frequently claim that we prepare students to "function collaboratively with colleagues" and to "engage in mutual problem solving with patients and families." Such learning outcomes require teaching strategies that deal with the content of group process in ways that help students transfer the theory and skills to the realm of professional nursing practice. The use of video, as the authors point out, and as I have discovered myself, provides students with means for the assessment of both individual and group behaviour. Further, videotape feedback, considered objective feedback, can initiate the vital process of self-examination that is the forerunner to behaviour change.

Some comments and questions about the study relate to the method and conclusions reported by the authors. Considering method first, it is important, for the reader as well as for investigators interested in replicating the study, to know the extent and nature of the "in-class instruction on group process" (p.7). For example, did this consist of one session in which instructions for the project were delivered? Or, did the session or sessions involve instruction or practice, or both, in identifying the group functions outlined in Figure 1? The extent to which students understood the specific functions and were able to identify them accurately has direct bearing on the results.

Another question has to do with the decision to vary the size of the groups rather than to keep the critical variable of group size constant. The authors provide rationale supporting five as the ideal number for small group problem-solving. Yet, it is indicated that the groups varied in size from four to seven numbers. One suspects that factors affecting the decision to vary group size had to do with the enrollment each term and with the voluntary participation of students in the study. Given these factors, it becomes apparent that an opportunity was present for the separate analysis of "group" and "self" functions in relation to group size.

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In other words, the proposition that "five is an ideal number for small groups" could have become a working hypothesis, open to testing in this study. Research on the question of group size, in relation to effective problem solving, has significance for nursing educators who want to maximize the results that can occur from small group learning strategies.

One last comment pertaining to the method has to do with the collection of data from the four open-ended questions that students were given following the videotape viewing. It is assumed that the questions and responses were in written format. It would have been helpful had the authors indicated, perhaps in a figure presentation, just how these questions were posed and the format in which they were presented to the students. Again, such information is useful not only for a reader to determine the soundness of method, but it is also useful to other investigators who are interested in conducting similar research. Incorporating open-ended questions in the study was a prudent move. The qualitative data arising from this source could obviously extend the meaning of the findings and provide further validation of the quantitative results.

Turning to conclusions, the reporting of results is succinct and the discussion is relevant to the literature review. Reference to the findings from other studies, particularly those of DiBerardinis, offer the reader a broader perspective on the authors' conclusions. Quoted material from the responses to the open-ended questions presents an authentic picture of the experience from the students' point of view, and in turn offers corroboration for the statistical findings.

The open-ended question focuses on "ways students could apply the group experience to a work setting" (p.9). It is unfortunate that the themes arising from this question were not discussed as it is a key issue. Analysis of responses to the question may well have indicated the extent to which students were transferring and applying their classroom experience to the professional setting.

A final comment is a suggestion for consideration by feature researchers concerned with examining the teaching of group process content. The major purpose for teaching nursing students group process theory and skills is to improve their professional functioning with colleagues and with patients. It then becomes important to assess the means and the extent of students dissemination of knowledge and understanding. Should faculty fail in this analysis, group process content may very well be viewed by students as a "fun and games" event that has little to do with nursing. A key role for the nurse educator is to assist the student to translate and integrate the meaning of the group process experience, including videotape feedback, to nursing practice. For researchers, a key variable to examine is to what extent nursing students can meaningfully apply the group process experience to "real life" nursing situations.