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UNIVERSITY OF SAN DIEGO
Philip Y. Hahn School of Nursing
DOCTOR OF NURSING SCIENCE

NURSING FACULTY CONNECTING WITH STUDENTS:
A HEIDEGGERIAN HERMENEUTICAL STUDY

by

Debra I. Craig, M.S.N., R.N.

A dissertation presented to the
FACULTY OF THE PHILIP Y. HAHN SCHOOL OF NURSING
UNIVERSITY OF SAN DIEGO

In partial fulfillment of the
requirements for the degree
DOCTOR OF NURSING SCIENCE

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Abstract

Nursing Faculty Connecting With Students:

A Heideggerian Hermeneutical Study

This study sought to gain an insight into the phenomenon of nursing faculty members connecting with students. Caring has been espoused as a key component of nursing education for many decades. In the last 10 years the terms caring and connecting are commonly found associated with each other, and yet there is no clear definition of connecting. It is important to understand a phenomenon from the point of view of those who are experiencing it. Therefore, a study which asked nursing educators to tell stories of the times they had connected with students was undertaken. Ten nurse educators in the Southern California area provided the stories for this study.

Heideggerian hermeneutic phenomenology provided the philosophical background for this study and the interpretation of the stories. Interaction with the stories of the nursing faculty led to the identification of constitutive themes of the stories. The participants sought connections with students as an outgrowth of their core belief about how to interact with people. Connecting often brought with it an increase in the depth of knowledge about the other, a desire to spend time with the other, and a greater acceptance of the other. If the teacher and the student held similar values the probability of connecting increased.

Connecting occurred on both the emotive/personal level and on an intellectual level. Intellectual connecting provided an increase in the energy, that was missing when

there was no connection. Intellectual connecting made teaching more fun and faculty members enjoyed the increased energy level. However, connecting also uses the faculty member's time and energy and connecting is sometimes hindered by the lack of one of these resources

Faculty members often experienced the inability to form a connection with students. Differing values were one of the major impediments to forming a connection. Preconceptions held by the teacher, the student, or both, were also identified as things that hindered connecting.

In order to understand the stories of the nursing faculty participant, one must be cognizant of their language. Language provided pictures of connecting and not connecting, feelings associated with connecting and not connecting, and descriptions of what connecting meant to the participant.

The stories of the nursing faculty provided the groundwork to begin to understand the relationship between caring and connecting. There are many questions left unanswered, but the faculty members provided a starting point for understanding what it means to connect with students.

May, 1996

Debra I. Craig

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DEDICATION

This dissertation is dedicated to my God and Savior who has provided me with the gifts that have made this milestone in my life a possibility. Without His gifts this dream would not have been realized, for He provided my family to sustain me, friends to support me, and teachers to inspire and guide me.

My family has been with me on this journey since its inception. Rick, you have always been the wind beneath my wings. I could never have soared without you. To my children, Steve, Cathy, and Sarah, thank you for you have provided love, humor, and repeated reality checks for me along this journey. To my mother, Dottie, and my in-laws, Helen and Don, thank you for putting up with my moods and crazy time schedules.

This dissertation is also dedicated to those who have expressed a belief in me and my abilities. I will always be grateful to Phoebe Lee, who connected with me and believed in me as a student. She provided me with a role model of a caring teacher. To Bobbi Underwood who has listened to me, guided me, and read much of my work, a special thank you is in order. To my soul mate, Patricia (Patty) Pothier, thank you for the long distant phone calls and your abiding support and encouragement. A special thank you also goes to Dr. Kathy Heinrich. Although she was unable to be part of my dissertation committee, she provided valuable feedback, insight and editorial comments.

A heartfelt thank you goes to the Administrators at Point Loma Nazarene College who provided many forms of support for me during this time of doctoral study. To Dr. Margaret Stevenson, without your help I would have been unable to complete my journey. To my friends and colleagues at Point Loma Nazarene College, thank for your

patience, help, and friendly reminders that life is never so serious that one cannot laugh.

I cannot end this dedication without thanking Dr. Nancy Diekelmann and Dr. Fred Kersten who helped me to develop a fondness for and an basic understanding of Martin Heidegger and his works. We sought together to find meaning.

This dissertation is lastly dedicated to my dissertation committee. You have allowed me to follow many paths without letting me get lost in the many twists and turns. Thank you for your patience and guidance. The process of obtaining a doctoral degree cannot be completed without caring and supportive teachers.

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CHAPTER ONE

I am a person who seeks to know
to learn
to foster
to grow
but I am not alone on this twisty path
for there are others
who seek
together we acquire
wisdom and knowledge
I teach the students from my experience
they teach me from theirs
who is the teacher?
who is the student?
our lives and growth are intertwined
sometimes teacher, other times learner
together we will learn
together we will grow
together we will experience
what it is to know
(d. craig, 1994)

The process of becoming a nurse can be enjoyable, painful, or a mixture of elation and despair. Often the student's development is influenced by an encounter with nursing faculty. No one member of a nursing faculty can foster growth in the lives of all of the students he or she encounters. However, nurses and nursing faculty can recall the special teacher(s) that made a difference when they were students.

The purpose of this study will be to give light to the lived everyday (Heidegger, 1962) experiences of nursing faculty "connecting" with students. As I look back on my

nursing education, the teachers that I remember with the greatest fondness were those who somehow positively connected with me and assisted in my growth. It is the substance of that connecting with students that I seek as I teach. What is it, in the everyday practice of the nursing educator, that fosters growth in students? How do nurse educators assist students to flourish and learn and develop? What are the nursing faculty member's descriptions of the everyday experience of connecting with the students?

Background to the Phenomenon of Interest

Bevis (1989a) proposed that students are to be viewed as persons of worth, dignity, and intelligence and that faculty members are to provide the structure and dialogue that promote the art and science of nursing. Nursing faculty can assist growth through nurturing interactions, usually categorized as caring behaviors (Hughes, 1992; Miller, Haber, & Byrne, 1990). Moccia (1990b) believed that the key to the future of nursing is the development of caring communities and that these communities will be reflective of the caring behaviors exhibited by nursing faculty. But is caring enough? De Tourney (1990) believed that intimate faculty-student interactions are necessary to build a viable partnership for the future of nursing. Is caring enough to build this partnership? I believe that nursing faculty must go beyond caring to develop a personal connection with students. But what constitutes the behaviors or actions that will lead to a connection between faculty and student?

Moccia (1988) asked nursing faculty to look at their perceptions of constitutive practices of teaching and reintroduce emotions, feelings, and imagination into their

teaching. Boyd (1988) suggested that teachers should share their stories through reflection to facilitate student development. Diekelmann (1988) described teaching as "a way of listening and responding, of hearing and heeding what is said" (p. 143). But how does one, as a member of the teaching profession, learn these heeding behaviors? Leaders in nursing (Bevis & Watson, 1989; Diekelmann 1988, 1990; Moccia, 1988, 1990b; Tanner, 1990b) encouraged a move away from the behaviorist methodology of teaching to a mode of interaction that reflects "caring" and "connecting."

However, the terms caring and connecting are not always clearly defined concepts. The implication is that there is a common understanding of meaning associated with these terms. Are caring and connecting synonymous concepts or are they comprised of separate behaviors? The Oxford English Dictionary (1989) defined care as " ... to feel concern (great or little), be concerned, trouble oneself, feel interest. ... " (p. 894). Boykin and Schoenhofer (1993) stated that caring is composed of relational responsibilities, a relationship which holds at its heart the importance of person-as-person. Their book goes on to discuss caring and its impact on nursing and nursing education as a transforming process. Leininger & Watson (1990) have edited a book dedicated to The Caring Imperative in Education which also discussed caring in various arenas of education and practice. Other literature addressed issues that include role modeling, ethical interactions, perceptions of caring, and ways of building relationships (Diekelmann, 1993a; Menges, McGill, & Shaeffer, 1986; Nelms, Jones, & Gray, 1993; Schaffer & Juarez, 1993).

Phenomenon of Interest - Connecting

While caring is discussed in terms of concern for another, the term connecting seems to reflect a deeper level of involvement. The basic definitions of the term connect provided in The Oxford English Dictionary (1989) was "to join, fasten, or link together" (p. 744). Connection is a "binding together" (The Oxford English Dictionary, 1989, p. 744). Diekelmann's (1992) research led her to assert that the times when teachers have connected with a student and made a difference is what keeps teachers coming back to teach day after day. However, these experiences are seldom talked about. They get squeezed out in a practice of teaching that is shaped by competition among students and teachers. It is the everyday interactions and practices of teachers that facilitate connecting with their students.

This study will explore the concept of connecting as described by nursing faculty. It is these teachers' stories about connecting that will describe connecting. It might be difficult for skillful teachers to verbalize these everyday teaching practices since, as Leonard (1989) stated, everydayness encompasses the practical, daily activities that are hidden or obscured because their meaning "is so pervasive and taken for granted that it goes unnoticed" (p. 52). Therefore, this study will address the nursing faculty's perception and stories of times when they have both connected and been unable to connect with students to illuminate some of the practices of these teachers.

Philosophical Approach

A Heideggerian hermeneutical phenomenological approach will be utilized to

analyze the teachers' stories of connecting to gain insight into the world of the expert nursing educator. Hermeneutical phenomenology seeks to uncover the hidden meanings and relationships that constitute the everyday practices (Diekelmann, 1989).

Relevance of Phenomenon for Nursing

Epistemology is the study of how humans know what they think they know and how they become aware of what they know (Schultz & Meleis, 1988). As nursing educators we are often unaware of how we developed our philosophy of teaching and our patterns for interacting with students. Bevis & Watson (1989) contend that teachers perpetuate the teaching practices utilized to educate them.

It is important to make visible the practices of teaching in order to have a future of possibilities (Diekelmann, 1989). Making everyday practices visible and providing a future of possibilities for nursing faculty will facilitate the growth from novice to expert teacher. The expert teacher's insights into components of connecting can provide a map for the novice and a tool of analysis for experienced faculty who have been practicing their art for a period of time.

The insights gained from the hermeneutical analysis of nursing teachers' stories of everyday connecting will illuminate the struggles and successes that are part of faculty practice. The stories will provide information that can be transmitted to new members of nursing faculties to aid them in developing skills to facilitate faculty-student interactions.

Robinson & Brower (1982) stated that the influence of a good teacher flows forever forward influencing many future generations. They stated that the enriched

“survivors” of a good teacher will reflect the spirit and influence of the teacher's contributions. This study will give light to the lived everyday experiences of nursing faculty connecting with students. It is hoped that this study will continue the forward flow of teaching excellence to future generations of nursing educators, nurses, and clients.

CHAPTER TWO

REVIEW OF LITERATURE

This chapter will provide an overview of literature relevant to the study of faculty-student interactions characterized as caring and ones that might foster connection. An historical perspective of the movement that is directing nursing education toward a more egalitarian enterprise will be discussed. Beliefs about teaching will be discussed prior to a discussion of faculty and students' perceptions of caring behaviors. Studies can be found that identify behaviors that students identify as caring behaviors demonstrated by faculty, as well as, descriptions of the attributes that faculty perceive to constitute caring will be brought to light.

However, I have not found a faculty description in the literature that addresses the multifaceted interactions that I believe are part of the phenomenon of connecting. There is a preponderance of nursing literature addressing the concepts and practices designated as caring. Therefore, the discussion of caring literature will focus on caring as related to faculty-student relationships. Caring behaviors between nurses and clients, students and clients, and nurses and students within a clinical setting will not be discussed. In addition, thoughts about the purpose of education, socialization of faculty and students, and faculty

and student relationships will be addressed.

Munhall (1994a, 1994b), Oiler (1982), and Omery (1983) proposed that the literature review for a phenomenological study not be done until after the data is collected. The purpose of the delayed literature review is to allow the phenomenon to reveal itself as it exists in the everyday world of the participants. A postponement of the review of literature also permits the researcher to remain as free as is humanly possible from preconceptions that might influence the findings of the study. Literature is reviewed after data collection to discover the relation of the study's findings to concepts or theories which are already part of the knowledge base in nursing.

In phenomenological research we must endeavor to suspend any preconception that would steer us into the realm of the expected instead of to the discovery of the participants' stories. However, we, as researchers, enter a study because the topic of research is important to us. A literature review is helpful in that it may illustrate the span between the researcher's world and the reality of the experience for others. Swanson-Kauffman & Schonwald (1988) stated that a literature review prior to data collection helped the researcher see one's own biases and examine others' description of the phenomenon under study. A review of the literature regarding the concept of caring in education is necessary to help me understand caring and to try to discover a relationship between caring and connecting.

An Historical Perspective of Caring in Nursing Education

Bevis (1988) traced the history of nursing education from the 17th century to the present. During the 17th through the 19th century the education of nurses came under control of the church. Nursing skills were passed from person to person in an authoritarian, mechanistic manner. The student was not allowed to question the teacher or display independent thinking. In the 1860s Florence Nightingale's influence brought a curriculum to the education of nurses for the first time. Although nursing now had a curricula, the educational process still commanded strict obedience and adherence to a moral code, while autonomy was actively discouraged. Florence Nightingale believed that schools for training nurses should be established on the principles of financial independence for the school, an educational program under the guidance of a qualified professional, school control of residential and educational facilities, and the development of a systematic curriculum of education (Chapman, 1969).

Early Nursing Education in the United States

In 1798 in New York, Dr. Valentine Seaman, established the first systematic nursing program which consisted of 24 lectures on obstetrical nursing and care of children. The Philadelphia Lying-in Charity for Attending Indigent Women established a program to train obstetrical nurses to serve the poor in 1839, while The Women's Hospital of Philadelphia nursing program started in 1861. The next school of note began in 1872 when Dr. Marie Zakrzewska established the New England Hospital for Women and Children nursing training program. Linda Richards, America's first trained nurse,

was a graduate of The New England Hospital for Women and Children (Chapman, 1969; Kalisch & Kalisch, 1986; Kelly & Joel, 1995).

The first three schools based on the Nightingale system were started in 1873. They like their predecessors were founded on strict adherence to rules and those in authority. These schools were The Connecticut Training School for Nurses, The Bellevue Training School for Nursing, and The Boston Training School for Nurses. Linda Richards was the night Superintendent at The Bellevue Training School for Nursing, and a year later became the Lady Superintendent at The Boston Training School for Nurses. These three schools were developed within the hospital setting, which was typical for this era. Two of the premier graduates of The Bellevue Training School for Nursing were Lavinia Dock and Isabel Hampton Robb. Isabel Hampton Robb became the first Superintendent of Nursing at Johns Hopkins Hospital School of Nursing when it opened in 1889. By 1900 there were 432 schools established to train nurses although there was no consistent curriculum for use in the training of these nurses. There was, however, The Manual for Nursing published by The Bellevue Training School for Nursing in 1878. It was hoped that the manual would provide a guide for the training of nurses (Chapman, 1969; Kalisch & Kalisch, 1986; Kelly & Joel, 1995). While the manual provided a guide for the content of nursing education, it did nothing to change the apprenticeship style of learning with its emphasis on strict obedience. This style of education did not espouse caring as a key concept.

Establishing Guidelines

The nuclei of professional nursing organizations began in the late 1890s and the early 1900s. The organizations were established to facilitate the sharing of knowledge among colleagues and provide a more consistent approach to nursing education. The American Society of Superintendents of Training Schools for Nursing, the forerunner of the National League of Nursing Education came into existence in 1883. 1869 saw the establishment of the Nurses' Associated Alumnae of the United States and Canada, the forerunner of the American Nurse's Association. The public health nurses, represented by the National Organization for Public Health Nursing, also so entered the picture in 1869. In 1908, another of the major nursing organization, the National Association of Colored Graduate Nurses, began. These organizations were instrumental in guiding the future of nursing and nursing education (Kelly & Joel, 1995).

The professional nursing organizations lobbied for the establishment of professional nursing education within the university systems. In 1916 there were only 25 nursing programs in colleges or universities (Kalisch & Kalisch, 1986). The National League of Nursing Education moved to establish a consistent curriculum for the education of nurses when it published the Standard Curriculum for Schools of Nursing in 1918. Even as the leaders in nursing tried to establish consistency in the education of nurses there remained the problem of inadequate and inconsistent education among its educators. Few teachers had a bachelor's degree and even fewer teachers had advanced degrees. Those who did hold bachelor's and master's degrees were not necessarily

liberated from the concept of strict obedience, for teachers often teach in the manner that they were taught (Bevis & Watson, 1989). By 1953 only 36 percent of nursing faculty had masters' degrees. As a result of the accreditation process, the majority of teaching positions in nursing education are now held by nurses with advanced degrees (Kelly & Joel, 1995).

Current Trends

A significant statement was made in 1965 by the American Nurse's Association when its First Position Paper on Education for Nursing recommended that all nursing education "should take place in institutions of learning within the general system of education" (Kalisch & Kalisch, 1986, p. 675). This helped to facilitate the move of nursing education into educational settings rather than hospital settings. The thoughts of one man greatly impacted the education of nurses in the 20th century as the national nursing organizations worked to standardized a curriculum for nursing education (Bevis, 1988). When Robert Tyler published Basic Principals of Curriculum and Instruction in 1950, he wielded a two-edged sword.

Diekelmann (1988) credits Tyler with being instrumental in legitimizing nursing education and the move to educate nurses within a university setting. However, nursing adopted the Tyler model of curriculum development and behavioral objectives as the only way to educate nurses. The curriculum must have measurable objectives that can be taught in the classroom and carried over into the clinical setting (Bevis, 1988). It emphasizes the product and not the process. Nursing education stressed learning content,

not on the development of the whole nurse with feelings and the ability to think.

Assimilation of knowledge was key, while the caring aspects of nursing were down played. Teachers did not model caring behaviors towards students and often criticized the students who demonstrated caring behaviors towards patients (King & Gerwig, 1981).

The Tyler curriculum model was not helpful in educating nurses who could think critically and who were also caring (Bevis, 1988; Diekelmann, 1988; Glaser, 1984; Tanner, 1990a). Nursing in the 1980s saw a need to redesign nursing education and refocus on the caring aspect of nursing. "Reacting to decades of rigidly prescribed nursing curricula, preconceived ideas about the ways students learn and should be taught, and the repression of creativity, these nurse educators have become the driving force to encourage new approaches to teaching and learning based on a philosophy consistent with the modern demands"(de Tornyay, 1990, p. 292). Nursing leaders have addressed this changing philosophy in the Curriculum Revolution series. The "Curriculum Revolution" encourages faculty members to analyze their interactions with students and to develop methods of interactions that foster growth and self-esteem. This is not to say that nursing faculty of the past have been uncaring. I believe that no matter what curricular model has been used, is being used, or will be used, there will always be faculty who interact with students in a caring way. Beck (1991) described the "Curriculum Revolution" as a time when "caring is becoming the central focus of nursing education and faculty members in schools of nursing are beginning to make care an imperative factor in teaching, research, and practice" (p. 18).

King & Gerwig (1981) described humanistic education as "... education for living" (p. vii) and stressed the interdependent relationship between student and teacher. Yet in the 1990's educators, such as Sellers & Haag (1992), were continuing to ask nursing educators to humanize nursing education. The humanization process begins with conveying a genuine concern for the students' well-being, mutual respect, caring, and personal interactions. Nurse educators were encouraged to become facilitators of learning rather than disseminators of facts. Diekelmann (1990) encouraged nursing educators to ground the caring cultural practices of nursing education in human connectedness. Is caring then a component of connectedness?

A Synopsis of Caring Literature

Heidegger (1962) stated that "the phenomenon of care in its totality is essentially something that cannot be torn asunder.... " (p. 238 [H194]). It may be impossible to disassemble caring into its component parts, but it is not impossible to discover the impact that caring has on our lives. Caring embodies concern about self and others and is based in trust. It is an essential and integral part of who we are as nurses (Baker & Diekelmann, 1994; Boykin & Schoenhofer, 1993; Watson, 1989b).

We learn what caring is by being the recipient of care and by interactions where caring can be observed. We need opportunities to practice the art of caring as an instrumental characteristic of self (Hughes, 1992). Chipman (1991) stated that although caring is described as an essential component of nursing and nursing practice it is a rather

loosely defined concept. Little research has been conducted to clarify the meaning of caring in nursing practice. Morse, Bottorff, Neander, and Solberg (1991) performed a meta-analysis of major theorists' conception of caring. Morse et al (1991) concluded that the major theorists discussed caring in relation to nurse-client interactions. Caring was also identified as a human trait, a moral imperative, an affect, an interpersonal interaction, and an intervention. Nelms, Jones, & Gray (1993) identified three themes associated with the concept of caring. Those three themes included caring as the combination of actions to meet emotional and physical needs, verbal communication associated with caring, and the giving of one's time as a caring gesture. Komorita, Doehring, & Hirschert (1991) described caring as a process, while the word caring has been used "as a noun, an adjective, a verb, and an adverb" (p. 24). There is little wonder that nurses and nursing faculty are unable to clearly articulate the concept of caring.

Caring in Education

The Art and Science of Educating

Van Manen (1982) stated that the Greek words techne and episteme denote modes of meaning, knowing, and disclosing that lets something come into presence through unconcealment. Within the realm of teaching there are those who merely teach, givers of information, and those who educate, providers of tools for learning. Teaching and nursing are related in their concerns about humans. The goals for both, according to Bevis (1989b), are rooted in science, which exacts logic and discipline, entails critical

thinking, rejoices in creativity and intuition, endorses caring as an ethic, and views humans as an irreducible entity.

Astin (1985) asserted that it is a commonly held belief within higher education that the sole purpose for existing is the development of students. In order to achieve this goal faculty should focus on educational effectiveness. But what is educational effectiveness? Diekelmann (1989) would maintain that educational effectiveness begins with teachers who live in the world learningly. To live in the world learningly is "to be open, always, to new possibilities, constantly transforming and being transformed. In this openness, teaching becomes learning, learning is hearing as in dialogue (not listening), and teaching is the struggle to understand" (Diekelmann, 1989, p. 38).

Astin (1985) distinguished three pedagogical viewpoints that have been identified as the most common faculty orientations which guide classroom teaching. The first viewpoint advocates the students learn through repeated exposures to lectures. Teachers who follow this pedagogical belief spend many hours preparing lectures that they believe will foster learning. While the second pedagogical view focuses on resources. If enough of the correct resources are brought together, then the student will learn. Resources include libraries, books, audio-visual materials, computers, etc. (Astin, 1985). But do students learn from resources or do they learn from teachers? The third teacher orientation is that no single approach will lead to learning but that learning will occur when the materials presented meet the individual needs of the students. To meet the needs of a student implies that the teacher is aware of what the student needs (Astin,

1985). A faculty member must care for the student to be willing to discover the needs of the student.

When faculty care about students, it is reflected in the opportunities they provided for students to learn (Learn, 1990). This, indeed, might be a fourth pedagogical point of view. Learn (1990) believed that "the role of the teacher is to assist the learner in working out the significance of what has been learned in relation to its meaning in the learner's life" (p.239). Caring behaviors exhibited by faculty members are often the keys that facilitate learning and the development of caring behaviors in the students.

Students Accounts of Caring

Caring has been described as the essence and moral imperative of nursing practice and nursing education (Boykin & Schoenhofer, 1993; Cohen, 1993; Diekelmann, 1990). It is viewed as an integral part of relationships among students, faculty members, students and faculty, and interactions which involved the recipients of health care (Appleton, 1990; Beck, 1991; Bevis, 1989c; Boykin & Schoenhofer, 1993; Cohen, 1993; Hughes, 1992; Miller, Haber & Byrne, 1990; Watson, 1989). Caring behaviors demonstrated by nursing faculty were important because faculty members are seen as important contributors to the socialization of students, especially in the area of caring (Komorita, Doebling, & Hirschert, 1991).

Students' definitions of caring faculty behaviors are many faceted. The facets have been categorized as commitment of self and time; belief in the ability and personhood of the student; and interactive (Appleton, 1990; Cohen, 1993; Cooper, 1982;

Diekelmann, 1988). Students experienced a sharing of self when faculty members related stories of their own struggles. Viewing the human side of a faculty member helped the students to be more accepting of themselves. Sharing of self also included behaviors such as smiling, eye contact, touching and listening intently (Blase, 1986; Komorita, Doebling, & Hirschert, 1991). Often sharing of self by a faculty member was seen as important as the actual time the faculty member spent with the student (Beck, 1991).

Students described nursing faculty who made themselves available to the students as caring. Beck (1991) stated that students perceived access to faculty time as the most valuable gift they could receive. If the students felt that the faculty would spend time with them as individuals, they were more likely to seek assistance from the faculty member (Blase, 1986; Ross, 1989). The concept of availability is reflected in Ross's (1989) article by the use of phrases such as "was available out of class" and "was always available at office hours" (p. 7).

Nelms, Jones, & Gray (1993) suggested that being available to students also allowed the faculty member time to express their belief in the student's ability. Respect for the student as an equal partner in the learning environment was important to the students. Respect was shown by validating the student's life experiences, allowing the student to take risks as one learned, and by providing positive feedback (Beck, 1991; Copp, 1992; Hedin, 1989). If the faculty member recognized and acknowledged the students' stress levels and fear and sought to deal with them in a realistic manner, one was perceived as caring (Beck, 1991).

Cohen (1993) stated that student-teacher interactions which affirmed the student's personhood were considered caring. Repeatedly students mentioned that the faculty members' communication of their belief in the uniqueness of the student's personhood was indicative of caring behaviors (Appleton, 1990; Cooper, 1982; Diekelmann, 1988; Hughes, 1992; Nelms, Jones, & Gray, 1993). This affirmation of the unique personhood of the students was often reflected in the way in which the teacher interacted with the student. Students felt free to voice their opinions, ask questions, disagree, and request help when needed when they perceived that a faculty member valued each person's uniqueness. Self-affirmation was found through the teacher's open, non-judgmental response to student situations (Boykin & Schoenhofer, 1993; Hughes, 1992). Faculty also demonstrated respect for the student in the holistic approach they used in interactions with the student. The students felt valued when the faculty member voiced the reality that being a student was not the only role in the student's life (Boykin & Schoenhofer, 1993; Hedin, 1989).

Beck (1991) best described caring student-faculty interactions "...as mutual simultaneous dimensions of intimacy, connectedness, sharing, and respect" (p. 19). Mutual trust and a reciprocal working relationship are also included as part of the students' perception that a faculty member cared for them (Appleton, 1990; Halldórsdóttir, 1990; Hughes, 1992). A sense of humor, empathy, honesty, directness, and openness were identified as hallmarks of a caring, interactive relationship between faculty and student (Hedin, 1989).

Faculty Descriptions of Caring

Caring is a paradigm that stresses the holistic nature of people, their interconnectedness, and their value as individuals (Appleton, 1990; Bunting, 1984; Cohen, 1993; Hedin, 1989). Cohen (1993) believed that the emphasis nursing places on caring must be reflected in teacher-student interactions. Nursing faculty employed many of the same descriptors that students used to describe caring behaviors. The signposts of faculty caring can be categorized in terms of faculty-student interactions, the modeling of desired behaviors, valuing the student, and involvement with students (Astin, 1985; Koldjeski, 1990).

Faculty believed that their interactions with students should include humor, empathy, trust, and availability (Blase, 1986; Copp, 1992; Diekelmann, 1993c; Hedin, 1992; Miller, Haber, & Byrne, 1990). Through faculty-student interactions, faculty members often become aware of situations in the student's lives that are impacting the student's performance (Blase, 1986). Interest in the student's progress, understanding, support, and patience are also important components of faculty-student interactions (Beck, 1991). Bunting (1984) and Clayton & Murray (1989) stated that faculty interest in students helped the students to become more involved with learning.

Nelms, Jones, & Gray (1993) believed that teachers must be aware that the behaviors they demonstrate in their daily interactions serve as a model which students may emulate. Therefore, to be a positive role model a teacher must be committed to being caring, authentic, and consistent in one's attitudes and behaviors (Blase, 1986;

Nelms, Jones, & Gray, 1993; Pappas, 1993). Students learn caring by being the recipient of care as well as by watching faculty demonstrate caring towards other faculty, students, and clients.

Modeling of caring behaviors is demonstrated in actions that accentuate the value of the individual. Faculty who display a personal interest in the student's welfare, both academically and personally, help the student to feel valued (Beck, 1991). Faculty highlighted times when they had dealt with a student on an individual level when they discussed the concept of valuing. Often the stories revolved around times when they had taken the student aside to deal with student blunders. Also important in valuing the student was treating the student as much like a peer as possible (Cohn, 1993; Halldórsdóttir, 1990; Hedin, 1992).

Works by Bevis & Watson (1989) and Diekelmann (1988, 1989, 1990) are among the literature that underscores the need to look at our faculty interactions and beliefs as they related to students. Blase (1986) discussed the evolutionary changes that occur in faculty involvement with students. New faculty were prone to interact with students on a friendship basis. As faculty become more acclimated to teaching, they increased the psychological and social distance in interacting with students. This evolved as teachers encounter problems that arose from becoming too friendly with students. As time progressed, faculty develop the ability to become less judgmental, less critical, and more accepting. This growth helped faculty to become involved with their students in a healthy, helpful way (Blase, 1986).

Nursing care cannot be rendered impartially but consists of an interconnectedness that derives from the oneness of humankind. Caring assumes and allows connection and allows us to enhance our connectedness with others (Moccia, 1990a). Connectedness is a part of nursing practice and nursing education. Cohen (1993) accentuates the importance of a holistic, interconnected relationship that must be part of nursing education. Boykin & Schoenhofer (1993) stated that "through being with another, connectedness occurs and moments of joy are experienced" (p. 6).

The authors cited (Boykin & Schoenhofer, 1993; Cohen, 1993; Moccia, 1990a) spoke of the concept of connecting but did not develop the concept. A review of the Cumulative Index of Nursing and Allied Health Literature (CINAHL) did not reveal literature that directly correlated with the concept of connecting.

A review of the literature for this study revealed that both students and faculty can identify behaviors that they consider indicative of caring. Behaviors that both groups identified as caring included spending time together, empathy, and feeling valued. Some authors suggested that caring allows opportunities for caring to transpire, without the insinuation that it will always occur. Although the words caring and connecting occur in conjugation with each other they are not interchangeable. But, they are both considered important to student-teacher relationships. This study will seek to understand and reflect on faculty stories of times when they have connected with students so that we may learn and grow. Diekelmann (1989) believed that by studying teachers and the lived experience of those who teach we become learners.

CHAPTER THREE

METHODOLOGY

In this chapter I will describe the overall design for this research. The first section is a discussion of qualitative research as a research methodology. The methodology associated with a hermeneutical phenomenological study and its use in understanding the lived, everyday experiences of nursing faculty is delineated in the second section of this chapter. The third section is a discussion of participant selection and data collection. Limitations and concerns comprise the final section of this chapter.

Qualitative Research

Origins

Qualitative research originated from a desire to study humans and their interactions free from the restrictions imposed by Cartesian dualism, empiricism and logical positivism (Bevis, 1989b; Dukes, 1984). Qualitative research serves as a viable alternative to those who cannot answer their questions through quantitative research methodologies. Rather than absolutes, natural and social sciences often seek to understand the everyday, working world without imposing quantitative measures. Human

sciences pursue meaning, understanding, intuition, creativity, and human values (Bevis, 1989b; Diekelmann & Allen, 1989; Diekelmann, 1993a; Dukes, 1984; Sandelowski, 1986; Van Manen, 1990). Sandelowski (1986) emphasized engagement, rather than detachment, as the way to study humans. Qualitative research is not a single research method; it embraces many forms of research. Philosophy has informed many qualitative research approaches including ethnography, grounded theory, symbolic interactionism, historical research, and various forms of phenomenology, including Heideggerian hermeneutical phenomenology (Morse, 1991b; Thompson, 1990).

Purpose

Qualitative research seeks to understand the meaning of being human by analyzing the description of the experience from the perspective of the participants (Appleton, 1990; Brink, 1991; May, 1991). The qualitative research methodology of choice for this paper is Heideggerian hermeneutical phenomenology. Heideggerian hermeneutical phenomenology has also been chosen because of Heidegger's (1971, 1975) emphasis on everyday experiences and the importance of the use of language to describe the phenomenon. Munhall (1994b) asserted that the emphasis on language in Heideggerian phenomenology is needed to give voice to the perceptions of those immersed in the experience. Language is that which encircles, maintains, proffers, and holds humans in a relation to the world. It is "the relations of all relations" (Heidegger, 1971, p. 107).

Heideggerian Hermeneutical Phenomenology

Phenomenology refers to a philosophy, a school of thought, and a research method. It is the study of human life, which is existing in the world, as it is lived and perceived, not life in the abstract (Heidegger, 1971; Hyde & Smith, 1979; Leonard, 1989; Omery, 1983). Phenomenology seeks the depth of the lived experience in order to provide or give light to an enriched understanding of that experience (Van Manen, 1990).

Hermeneutics can be viewed as giving voice to a phenomenon (Hutchinson, Wilson, & Wilson, 1994). But more than giving voice, hermeneutics asks that an experience, a phenomenon, be interpreted through the meaning given to that experience by the one experiencing it (Diekelmann, 1993a; Knaack, 1984; Leonard, 1989; Omery, 1983). Hermeneutics seeks to provide an understanding of a phenomenon that is more precise than the everyday, pre-theoretical depiction. Dreyfus (1991) stated that hermeneutical phenomenology “is an interpretation of human beings as essentially self-interpreting, thereby showing that interpretation is the proper method for studying human beings” (p. 34).

Edmund Husserl, with his development of transcendental phenomenology, is the classic initiator of philosophic phenomenology (Dukes, 1984; Sandelowski, 1986; Thompson, 1990). However, it was Martin Heidegger who developed the basis for hermeneutical phenomenology. The terms “hermeneutical phenomenology,” or “Heideggerian phenomenology” distinguish Husserlian transcendental phenomenology from Heideggerian hermeneutics (Thompson, 1990).

Hermeneutical Methodology

Selection Criteria

The hermeneutical methodology I employed began with interviewing nursing faculty in an attempt to discover their perceptions and self-interpretations of the everyday experience of connecting with students. To achieve this end a volunteer sample of convenience was utilized for this research study. Nursing faculty from schools located in the southern California area were contacted and invited to participate in this research. The schools of interest represented two private, religiously oriented baccalaureate nursing (B.S.N.) programs, a state college baccalaureate nursing (B.S.N.) program, and two community college associate degree nursing (A.D.N.) programs. I had entree into these schools through professional relationships. These faculty members were deemed appropriate for the research study based on their knowledge and lived experiences as a member of a nursing faculty (Brink, 1991). It was assumed that nursing faculty who believed that they had an idea of the concept of connecting would be willing to volunteer for this study (Morse, 1991a).

Sandelowski (1986) stated that "... in qualitative research anyone belonging to a specific group is considered to represent that group" (p. 32). Specific qualifications for this study were that the participant was a member of an undergraduate nursing faculty. They may teach either in an associate degree (A.D.N.) or in a baccalaureate (B.S.N.) nursing program. I could not perceive of factors that would cause an undergraduate nursing faculty member to be excluded from this study. Ethnic background, gender, age,

or the length of time in the teaching profession were not factors for exclusion.

It has been argued that a volunteer population will produce a biased group of participants (Morse, 1991a). However, in hermeneutical phenomenology the researcher seeks to make explicit the self-interpretation of people in certain situations, with certain motives and pragmatic goals, carrying out certain tasks; they could be biased or not; that is something I, the researcher, have to find out. My datum, after all, is precisely and only how people perceive and interpret themselves in doing what they are doing.

I was able to interview two nursing faculty members from each of the chosen schools, which produced a participant group of 10 faculty members. All of the nursing faculty members who volunteered taught in generic nursing programs.

The Participants

All of the nursing faculty who participated in this study were women. This was not by design, but rather the result of the volunteer sample. Their teaching experience included a wide variety of subjects, teaching settings, and nursing programs. I found the participants to be animated and vivacious during our discussions. A brief vignette of the participants in this study can be found in Appendix A.

Data Collection

Data collection began after this research study had been approved by the Committee on the Protection of Human Subjects at the University of San Diego (Appendix B). An information packet was sent to the Dean or Chair of each school of interest following Human Subjects Committee approval. The packet contained a general

letter of information (Appendix C) and five individual packets which were made available to nursing faculty of each school of interest. The individual packets included a consent form (Appendix D), a request for the participant's name, telephone numbers, the best time to contact the interested faculty member, and a self-addressed stamped envelope. The participants were asked to return the sheet asking for their name and telephone number in the stamped, self-addressed envelope.

After receiving the participant's telephone number I contacted the participant and set up an appointment for the interview. After reviewing and signing an informed consent form (Appendix D) the participant was interviewed, using a semi-structured interview. Semi-structured interactive interviews allowed me flexibility in obtaining the stories of the participants. However, it was necessary to provide enough structure so as to capture the pithy stories for comparison between and among the participants. The interview began with an open-ended statement or question - Tell me a story about ... (Appleton, 1990; May, 1991). (See Appendix E.) Verbal prompts were utilized during the interview to clarify what was said or to probe more deeply an area. Benner (1994) stated that the lines of inquiry need to be broad and open so they can be "altered, shaped and reexamined by the dialogue with the actual text" (p.106).

The interviews took place in the setting preferred by the participant. Interviews were conducted in the faculty members homes, at their place of employment, in my office, and in my home. The interviews were recorded on an audio-tape. Each interview took from 45 to 60 minutes. The need for an additional 60 minutes was anticipated for

the participants to interact with the research findings near the conclusion of the study. I have been unable to foresee any risks to the participants that might be inherent in this research study.

I audio-taped and transcribed each interview. I gave each interview an identification number and placed the tape in a locked file for reasons of confidentiality. All tapes were destroyed at the conclusion of the research. Transcriptions of the text were used for the purposes of interpretation and identified only by number. All information, including quotes, were reported in a manner that protects the anonymity of the participant in the publication of the results of the study.

Interpretation of the Text

The analysis process for this study started after I had finished the transcription of all of the interviews. The self-interpretations (interviews) of the participants were used to develop the basic ideas, themes, and constitutive patterns employed to identify and explain the participant's perceptions (Diekelmann, 1993a). My task was to show that my interpretation is more probable than a limited number of other possibilities (Allen & Jensen, 1990).

Hermeneutical phenomenological interpretation arises from the stories of the participants (Diekelmann, 1993a, 1993b; Leonard, 1989). Heidegger (1971) stated that hermeneutical phenomenology does not imply a method of interpretation but means the interpretation itself. "In interpretation, understanding does not become something different. It becomes itself" (Heidegger, 1962, p. 188 [H148]). Interpretation of the text

is the key to the hermeneutical phenomenological methodology. The text is the source of data and interpretation involves an ongoing process of repeatedly returning to the text. Interpretation of the text becomes a dialectical, dynamic interaction. Interpretation and understanding become bound in a circular activity as one moves back and forth between an overall interpretation of the text and the details which reveal themselves. Each step of the ebb and flow between detail and the overall text contributes to richer and richer understanding of the phenomenon (Dreyfus, 1991; Omery, 1983; Van Manen, 1982, 1990).

The methodology of interpretation and finding meaning within the text involves a variety of steps depending on the author one reads (Allen & Jensen, 1990; Leonard, 1989; Omery, 1983; Van Manen, 1982). Diekelmann & Allen (1989) described a seven step process which involves individual and group interpretation. After the stories are transcribed each member of the research group begins by reading all of the texts. Weekly sessions are then scheduled where portions of the text documents are reviewed and categories identified. The first interpretation of any given text is offered by the principal investigator. Group consensus is the goal. Each member of the research team then develops an independent analysis of each text to identify similarities and differences. Discrepancies in the individual interpretations are clarified by returning to the text and evaluating the interpretations in light of the context of the story. Identification of relational themes which are visible in all texts is then undertaken. Extensive documentation is used to support relational themes and to clarify any questions. As

relational themes become clearer, constitutive patterns begin to be identified that express relationships among the relational themes. The next step of interpretation involves the validation of the analysis and the constitutive patterns by persons who are not part of the research team. This may be achieved by having selected participants and/or people who are familiar with the research area read the constitutive patterns. If the independent readers agree with the constitutive patterns identified, then the analysis is deemed to be representative of the stories told by the participants. The final step is preparation of the finding with sufficient quotes from the text to support the conclusions.

The methodology I employed for interpretation of the text was a modification of the method described by Diekelmann & Allen (1989). Diekelmann (June 28, 1994, personal communication) stated that strict adherence to the seven step method of interpretation is impractical. It is difficult to clearly define the circular interaction of textual interpretation because the dynamic flow is from whole, to parts, to whole. It requires a continuous beginning anew and a return to the world of the participants. I became as much of a participant as those interviewed. I was in a dialectic interaction with the texts as I sought to understand the stories of the participants. "Dialogue must always affect everyone involved, or it is not dialogue. It continues long after the participants have departed. It is often experienced in the form of recollection or reflection" (Diekelmann, 1988, p. 146).

The Process

I began the interpretation process by transcribing the interviews and then reading

each interview in order. My perception of how a teacher should interact with students influenced my interpretation because it has lead me to asking a question about the art of teaching as I was in the midst of teaching. Through interpretation I sought to find what was crucial to the art of teaching that is most often overlooked because of its everydayness. Interpretation began with the ideas presented in each interview. After reading the interviews twice I started identifying what I believed to be the basic ideas and themes within each interview. To help with the identification of themes I used the MARTIN software package (Diekelmann, Lam, & Schuster, 1991). MARTIN allowed me to isolate portions of the text that were thematic. I could then attach key words to the material for retrieval purposes at a later time. MARTIN also facilitated the grouping of ideas into broader categories. The initial coding scheme can be found in Appendix F.

Selected interviews were also read by my dissertation committee and interested qualitative researchers who helped to identify themes and dissipate researcher bias. My dissertation committee was able to follow my train of thought reflected in my identification of themes. As they identified similar themes it became evident that my thematic interpretations were true to the stories told by the participants in this research study. This helped to ensure that my biases had not guided my interpretation.

A comparison of the ideas and themes across the interviews was then undertaken to begin the development of the constitutive themes. Final identification of meaningful constitutive themes was my responsibility. Constitutive themes are the most inclusive category for each main concept. Constitutive themes (Appendix F) have been supported

by quotes from the participants' interviews. The narrative that developed from the constitutive themes and the interviews was sent to two of the research participants for feedback regarding the accuracy of the description. The two nurse educators indicated that they believed the interpretation to be true to their concept of connecting.

The participants should be able to recognize a reflection of their own experiences in the final narrative. Selection of those portions of text that are to be utilized to represent themes and constitutive patterns is an area that has been considered problematic. Text selection is not infallible, but through ingenuity, questioning, reflection, and dialogue the text utilized will ground the study and clarify the area of interest (Bergum, 1991; Diekelmann & Allen, 1989; Dukes, 1984). Webb (1992) stated that new knowledge is constructed, not found.

Limitations and Concerns

Researcher Involvement

I discovered that it was very helpful to have identified areas to be probed. Without the questions that I had developed it would have been easy to digress from the concept of connecting. I also found it difficult to refrain from telling stories of my own experiences of connecting with students. I know that I presented non-verbal assent through smiling and nodding my head. It is my belief that these interactions served only to encourage the participant rather than influence the direction of the interview.

In order to refine the interpretation of the text or data, some phenomenological research methodologies suggest bracketing. Bracketing refers to the temporary suspension of pre-understandings and assumptions held by the researcher (Dukes, 1984; Knaack, 1984; Munhall, 1994b; Omery, 1983). Expressing one's inferences and preconceptions about the area of study is a component of bracketing utilized to help one to become conscious of and attuned to one's beliefs. Personal beliefs, background understanding, and values are always part of any scientific endeavor (Leonard, 1989; Webb, 1992). Bracketing is acknowledging what you believe about an area of interest and yet wondering what the experience is for others. The purpose of research is not to validate the researcher's beliefs but to allow the other to give voice to one's personal lived experience (Munhall, 1994b).

In order to make explicit my preconceptions, I will identify my assumptions regarding connecting. My intuitive beliefs and assumptions are that all nursing faculty members have experienced a time when they have connected with a student. Connecting is a multifaceted phenomenon and it goes beyond the typical faculty-student relationships. A nursing faculty member may care (have concern) for students, but not connect with students. A faculty member who connects with students also exhibits caring behaviors toward students. The last assumption is that connecting has a positive influence on the student, faculty member, or both.

Issues of Rigor

Rigor in hermeneutical phenomenology primarily deals with methodological

issues such as credibility, intelligibility, auditability, and ethical conduct (Morse, 1991b; Sandelowski, 1986; Van Manen, 1990). Creditability addresses the suitability of the participants as representatives of the population of interest and their ability to be good informants. Morse (1991a) lists three characteristics of good informants. Morse states that they must: (a) be willing to critically examine their experience; (b) be willing to share the experience; and (c) be willing to answer the interviewer's questions. I believe that those colleagues who volunteered for this study did so because they had an image of the term "connecting". By virtue of their experience as nurse educators, the participants were the experts in the area of connecting. They were willing to share their experiences and were able to articulate their experiences in such a manner as to represent their lives as they interacted with students with clarity.

Heidegger (1959) stated that a phenomenon can be perceived from a limited number of viewpoints which reflect the lived experience of the participant. Intelligibility and credibility are used to present the phenomenon in a manner that is rational and believable. If this is accomplished then the reader can grasp the essentialness of what is being presented. They can perceive what the essence of the phenomenon is as it presents itself to them.

Intelligibility for a hermeneutical study is judged by two questions. The first question is: Can the experience, as described by the researcher, be recognized by the participants of the study as a representation of their experience (Diekelmann, 1993b)? Perhaps the truest test of trustworthiness is the response received from the participants

when presented with the analysis and narrative of the study. Does the researcher receive the phenomenological nod which is indicative of the participant's agreement that the essence of the phenomenon has been captured (Allen & Jensen, 1990; Brink, 1991; Munhall, 1994b; Sandelowski, 1986)?

The second question asks if it is possible for the reader of the completed study to develop the same interpretation based on the text of the study (Allen & Jensen, 1990). Hermeneutical phenomenological studies must provide both an explanation and an understanding of the phenomenon of interest. The discussion of the study must be presented in such a manner that the stories, when woven together, make sense. The investigator does not seek to make generalizations, but rather to articulate one's findings in a manner that portrays the stories of the participants (Munhall, 1994). Hermeneutical phenomenological studies are, by their very nature, not commonly considered generalizable. Each research session is unique because of the participants involved. However, although the experiences are unique, they do allow for some degree of typification which are amenable to theoretical analysis. The world in which we live may have novelties, but it is never absolutely novel or we would not recognize anything or anyone (F. Kersten, personal communication, November 27, 1994). Thus the interpretation should reverberate with familiarity and possibility not only for the participants of the study, but for anyone who has encountered the phenomenon. This familiarity results from having everyday practices brought to light and recognized.

The auditability of the researcher's thoughts and decisions as the research progresses is also a component of ethical rigor (Morse, 1991a; Munhall, 1994b). Auditability refers to the reader's ability to follow the decision paths of the researcher. Auditability helps the reader to understand why certain decisions were made and why particular portions of the dialogue were chosen for inclusion. Auditability is also important because there can be no exact replication of this study. Appendix F provides insight into the process of the initial coding, a more succinct description of the phenomenon with constitutive themes, and the thought process related to the description of the findings in Heideggerian concepts. In a phenomenological study "measurement" consists of a series of judgements by the investigator. The best that a researcher can hope for is that a future study would result in similar themes (Brink, 1991; Diekelmann, 1993b; Sandelowski, 1986; Webb, 1992).

Ethical conduct begins with obtaining informed consent, providing the freedom to withdraw from the study, and disclosing of inherent risks to the participant. Prior to each interview the purpose of the study was reviewed, the participants were offered an opportunity to ask questions, and the consent form was reviewed and signed. Confidentiality and anonymity of the participants must be maintained in the collection of data, the evolution of data into constitutive patterns, and any presentation of data in written or oral forms. All audio-tapes were given a code prior to transcription to protect the participant's identity. The tapes were also placed under lock and key and only transcripts were used for the purpose of interpretation. I must note that I was working

under the supervision of a dissertation committee, who reviewed all steps of the study to offset any threats that might appear under procedural rigor.

Communication of Findings

The findings of this research will be fully reported in Chapters Four and Five. Additionally, copies of the findings will be available to those who participated in the research. Articles for publication will be submitted to refereed journals for nursing audiences and for other audiences, i.e. philosophy and education.

CHAPTER FOUR

FINDINGS: THE CONSTITUTIVE THEMES

Through the stories of members of nursing faculties I have sought to understand what it is that teachers perceive to be that part of the art of teaching that makes a difference in the lives of students. This chapter will present the constitutive (key) themes identified during the analysis of the stories provided by the participants. (Appendix F) The constitutive themes will be supported by the words of the nursing faculty interviewed for this study. It is hoped that other educators will be able to identify themselves in the stories.

The six major themes that form the basis of the findings of this study are: (a) teachers as they see themselves; (b) the two basic types of connections that occur - intellectual and emotive connecting; (c) the unfulfilled efforts to connect; (d) the cost of connecting; (e) the language of connecting; and (f) the philosophical discussion regarding which comes first, caring or connecting.

Teachers as They See Themselves

The faculty members interviewed provided insight into the world of the nurse educator as they responded to the questions used to guide the interview. They expressed a realization that they could be instrumental in shaping the students concepts of nursing

and how nurses interact with clients. Faculty-student interactions were often fostered by shared language, values, and practices. The interviews have helped the teachers to become more aware of the manner in which they exist and interact in the world, as teachers, and to bring their experiences to light. The ways that educators chose to interact with students often resulted from the way that they perceive the world and the inherent value of individuals.

Philosophy of Life

Their Natural Way of Being

When I asked the participants to tell me stories about times that they had connected and things that they did that facilitated connecting with students, they often started by discussing their beliefs about how they interacted with people and students in their everyday encounters. Individuals are to be respected and valued for their uniqueness, for who they are and what they can become. The faculty members had interacted with many students during their careers and often their interactions were guided by an intuitive response to the situation. Some of the patterns of interacting were so much a part of the persona of the faculty member that they were unnoticed by the teacher until they were questioned about them..

Nursing faculty members identified beliefs that they felt were important to guided their interactions with others. One faculty member describes her respect for students as a pattern for the way she formed relationships with students. For her, relationships have respect as their basis.

I have a basic principle, a belief, a value of my own that I try to come from, sometimes I do a better job [at it] than [at] other [times], but it's the basic belief in respect for individual persons and I do not have to feign admiration for the people and the nurses that the vast majority of my students are.... I admire so much the grandeur of what they do. And I say that with all sincerity, that, I'm not trying to be (pause), you know, exaggerating or over flowery with what I say. So that forms the basis of my relationship with most of them, right there.

Another faculty member described how her interactions with those she encounters was an unconscious part of her everyday being. She was aware that her behavior could have either a positive or negative affect on people without being conscious of what had occurred as a part of the encounter. She talked about chance encounters and seemingly insignificant acts of kindness.

I believe that in all of life there are moments in time that we affect somebody's life in a positive way, I hope, probably in negative ways as well. But I firmly believe that we will affect somebody's life in a positive way and have no idea that we did it. And it may be the person that stumbles on the curb and you say, "Are you okay?" And then they say, "Yes." And you walk on and maybe it's the first time that somebody honestly cared that they were okay and made them think differently.

The kiddo in the hospital that I give a hug to that shows that not everybody in a white coat is frightening. I don't know that I did that. But I really believe that those things occur because I find, I've been around a long time and been a nurse for 28 years, and I've run into patients years later that have told me things and I said, "You're kidding. That made a difference." The silly little things. The little girl that one night, she was so nervous, this is years ago when children were admitted the night before to have their tonsils out. This little girl was admitted the night before surgery. She was very frightened, very nervous, and the anesthesiologist was really, really busy and hadn't come up yet and they use to give pre-op meds, sleepers. It's bedtime and I called him and got a sleeper for her and I stayed with her and just kind of told her a story or, I don't even remember what I did. But I remember staying with her. The next day I came to work, I worked the evening shift, came to work at three in the afternoon, and here is this father, the little girl's coming back from surgery, and she says, "That's her, Daddy. That's her." This father had a

three pound box of See's chocolates to thank me for taking care of his daughter. And I said, "Well (pause)" and I couldn't tell what I did. He had to tell me, I had no idea. So I really believe those things occur and obviously I connected with this little girl, allayed her fears, and it meant something to her. And I think these things happen with students too.

One educator described the situation that teachers experience when their responses to students seemed to be an automatic interaction. She realized that the interaction with a student has as its center the experience gained through other encounters with students.

Some of it is so routine that you don't think about it. Some of it is so routine in what you do to take care of students that you say and do things that you believe are indicated based on your experience. Well, I don't see, you just don't think about it. It's just what needs to be done and when they come back and let you know that, yeah, it hit them in some way then you know that they made some kind of a connection.... Sometimes I think that there are just things that you do, that they may be so much a part of me, or part of that situation and you don't think about it.

These members of nursing faculties discussed their respect for students and their modes of interacting as a part of who they are, as people and teachers. Teachers expressed the importance of being "themselves," of being authentic.

Being Themselves

Authentic being is a characteristic of the way we live and interact with ourselves and others. Authenticity involves a constant re-examination of ourselves and those things we are involved with. Faculty felt they had to be true to their concept of what a teacher is and does in order to have the possibility of connecting with students. At times their concept of what a teacher does included a degree of flexibility, not in the requirements for the course or the quality expected, but by acknowledging the demands of life on the

student. Acknowledging life's pressures and flexibility versus rigidity as a style of interacting with students was identified as a perceived difference by the participants. The nurse educators who participated felt that they differed from other educators in the area of flexibility.

One faculty member talks about interacting with students in a flexible way. She knows that other faculty believe in more rigidity, but she believes that she is role modeling what a caring nurse acts like.

So, I'm (pause) I suppose that, to the point of being rigid about that [the need to fulfill the class requirements], but I am flexible about time, sometimes if, particularly if people make arrangements for things, I try to leave a little leeway and some of my colleagues say we need to be very, very strict about deadlines and all that, because in the real world they'll be expected to meet the deadlines. But this is what I think, I want to role model somebody that can be a little bit flexible with the human needs of people and I hope that if I can treat them that way, while not sacrificing the requirements, expecting the task to be done, but still create a climate where people can do it and still live as human beings that's a value of mine that I would like to send across and I think I have sometimes. I think it's worked pretty well.

Another faculty member expressed both her awareness and the students recognition that her everyday way of interacting with students were different from those of colleagues. This teacher reflects on comments made to her by students.

So I think that's the kind of caring and concern that I have with patients I also have with students. And trying to really help them through, what I think, is a difficult program, nursing.... I had a couple of students tell me one time that they appreciated having me in class because I treated them like people and they didn't often see that from other faculty, or didn't feel it. Whether it wasn't there or not I don't think is the issue, it's just they didn't feel it from other people.

The following quotation illustrated another faculty member's need to be authentic.

If I don't feel like I'm being myself, if I feel like I'm doing what someone else would want me to do, I probably am not connecting very closely. My connections are more natural and if I'm feeling natural, if I'm feeling like I'm being myself then a lot of times I feel like students are too.

The valuing of the unique personhood of each individual was reflected in the ways teachers interact with their students. Part of valuing the unique personhood of the student involves being honest about nursing and the demands students face in their lives.

Teacher Comportment

People are shaped by their culture, their history, their perceptions, and their experiences. These forces guide the way humans comport themselves and how they interact with each other. Nursing faculty often revealed information about themselves and their experiences to help students. They also discuss ways to help students enter the world of professional nursing.

In The World

As nursing faculty interacted with students they were cognizant that students existed in a world professional nursing, but they were also cognizant that students existed in a world larger than sphere of nursing school which needed to be blended with their school role. One teacher reflected on an occasion when a connection occurred that she was unaware of until a later time. The connection had occurred during a time when the teacher utilized stories and devotionals to set the mood for the day.

Well, I can think of one that I didn't perceive as having connected until afterwards when she talked to me out of her student role. Which was affirming to know that I, that's my manner and that I'm not really focusing

on that. But it had to do with, it was more spiritual, which is what she picked up and I was not aware of that. And it came from doing devotional before clinical times and I usually like to find something that's appropriate or fitting for what the mood of students seems to be or perhaps what my mood is to kind of have a beginning place to start from, some encouraging thought. So I do that for clinical regularly.... after graduation she came back and she said, "Now I have something to tell you. Now that I'm not your student." And I don't know what that all meant, but then she described how my manner with her was always one of openness, was one word she used. And realistic, or in touch with normal, everyday kinds of things that students experience. That she wasn't just a student, she was also a mom, she was also a woman, she was also a wife. You know, and looking back on it, I would pick different kinds of vignettes, or stories, or encouraging things that do touch our parts of us as nurses. You know, she said, "I like that because it reminded me that I was a whole person." And that's part of our motto at the University to make humans whole. You know, so she's telling me this after the fact and she's telling me this in detail. It was amazing to me that she remembered the details. I mean the time of day we would pray, or the stories, she remembered specific stories. For me it was just kind of, I'd used them at different times and they were helpful, but I didn't realize the match it had for her.

Faculty members voiced the importance of portraying a realistic view of the world of nursing. Faculty acknowledged that there was a difference between the theoretical world and the reality of a practicing nurse. One faculty member spoke of acknowledging the real world in order to move the students into the world of possibilities for their own practice, "... to move out into a little better space".

I'll tell you what I think works best and I may, it just may be because I want it to work. But I think when I deal honestly with them as learners and as people, as nurses, and don't try to be something I'm not to them. Don't try to set the nursing profession up for them as something it isn't. They can see through that faster than anything, especially when they are seniors, because they have seen enough and heard enough and I cannot come across as excessively idealistic with them and expect to stay connected to them. You've got to face the real world with them. And when we do that, then when we face the world like it is, then we get free to talk about how it might be and, I think maybe move ahead a little without

trying to accomplish anything ultimately grand. But just moving out into a little better space, at least that's my hope and I think it's happening....

Not only is there a world that exists outside of nursing and a difference between the real world and that which is theoretical, but there is also a human side to nursing. Faculty members often revealed things about themselves to help students see the human side of nursing.

Revealing of Self

Revealing of self was a common feature that helped teachers connect with students. Faculty often helped students through the use of personal vignettes and stories. One faculty member tells a story about revealing a part of herself to students and the reaction of another faculty member to her stories.

I'm also not afraid to be personal with them. To let my own (pause), and I know that there are faculty members who believe that we really should be like psychotherapists, like the analyst and not reveal anything of ourselves that that interferes with the teaching learning process, but I happen to believe exactly the opposite. I think it can also be a relationship tool to students. The fact that I have had children and can tell stories of the mistakes I've made with my own kids and how similar we are.... I can use my own stories about my own children and my own experiences. I happen to know that other people don't believe in doing that because I was, a few years back, evaluated by a faculty on our annual peer evaluations and during lecture I used an example of my son on that problem and oh my goodness, he wrote me up something fierce for it. And you just learn who doesn't do that, I guess.

The previous teacher revealed part of herself to help connect with students. The faculty members believe that disclosing aspects of their lives brought them closer to the students because the students could relate to them on a different level. One teacher describes why she chose to reveal of herself and her perception of the effect that sharing

had for herself and for her students.

I think you have more fun teaching. I think when you have a class that you connect with you generally share more of yourself. You know, an example, I think it's easier to pray with a class you connect with and we often will start our classes with a brief prayer. It's just easier to be more open, more yourself, have more fun, I think maybe the students have more fun. I think students like to know a little bit about faculty and have some of those personal connections.

Another faculty member described what she revealed to students about her philosophy of interacting with them. She stated that students often tried to figure out what the teacher wanted and she felt that by explaining her expectations the students felt more comfortable. She says:

I tell students, when I get a new group, because they come to me and are with me such a short time, I will tell them right away what they can expect from me. And I'll tell them right up front that I'll never embarrass them, that I'll never talk down to them, or I'll never, in a room with a patient or if there's other peers around or if there are other people around, I tell them you can always know that I'm not going to embarrass you or degrade you. Not that I would, but I say, "That if there is something that you've done I might reach over and touch your hand, if the patient's back is turned. Or I might gently tap your toe if I think you need to look at me and get your attention, but I would never verbally abuse you." So I tell them that right up front because they don't know me from Adam, you know. And they may have come from other situations where it's been known that that's the kind of experiences they have had, so they might come sort of frighten and not know how I'll handle them.

Another faculty member stated that she did not feel comfortable revealing herself in the lecture setting. However, in the clinical setting she shared her own experiences of connecting and being unable to connect as a student.

... I think the things that I do that help me connect with students, not so much in the classroom. I keep sort of back. I will tell an anecdote or something, but I try to stay away. But when I'm in the clinical area I think

that one of the things that I do pretty well is make the students feel at ease so that they can come to me if they need to.... I tell them that they can always come to me with anything. A lot of times I will or if I can tell them about a previous student or peer or some, you know, a problem or a situation that may have come up in clinical or in school and how I was able to assist this student or the peer in solving the problem.... Often times that will open things up to them that they say, "Well, someone else did it. Maybe I can too." I think if I tell them personal anecdotes, things where I was maybe unable to do ... unable to approach an instructor as opposed to approaching the instructor 20 or so years ago. Things weren't, people were not as approachable when I was in school and often times I will tell them that and, you know, relate to them how important I think it is that they're able to come to me with whatever situation.

The teachers used stories to help the students recognize that they had gone through similar struggles and had survived. The revealing of self was often a way that nursing faculty reached out to students.

Reaching Out to Students

Reaching out to students was important to the faculty members who participated in this study. At times faculty used humor as a vehicle for connecting with students. At other times they perceived that making themselves available to students facilitated connections. Making themselves available included simple things like attending student sponsored functions and keeping their office hours. The teachers also stated that reaching out to students included leaving their offices to go and speak with a student.

Into Their World

The participants spoke of reaching out to students by going into the world of the students rather than expecting the students to come to them. The faculty members were cognizant of the reticence that some students have about going to see a faculty member in

their office. The participants often initiated connections with students through simple acts of reaching out when they perceived students' hesitancy about coming to them. One nursing educator made herself available by seeking out students she knows.

I think having a presence that can be manifested in different ways, interest in student groups, maintaining the office hours that you say you will. You know deliberately doing that, just having that kind of presence. Being in touch with what's going on at the school so you can say, "Well how is the event?" Whatever the event might have been, so they can know you're aware of what's going on at the school and what interests them or knowing that they're a junior now instead of a first semester sophomore. Those things are deliberate things. So that presence and just the seeking out. If I go up to a student or I see someone in the hallway, I'll offer information or ask for information versus them having to come into my office. That's my space, if I can meet them in the hallway, I'll hear their voice and I'll go out there and I'll say, "Oh, I thought that was your voice. I haven't seen you in a semester or two." So the seeking out facilitates that.... Sometimes you get that sense with teachers. I've had that with some teachers and I know I could seek them out or I could call them at whatever time of day. But to know that and to hear that articulated I think is another step beyond what they just perceive, then you can affirm what they perceive or not.

Another faculty member entered the world of the students and reached out to students through the use of compliments.

I try to make a point to connect with them. Like I'll stop and admire what they are wearing, or tell them that they did a good job on a paper, or just something to be connected to them. And some I probably miss. And some I never do connect with, but I like it better when I feel connected to them, that's part of the joy of being a teacher. And I, and then some of them personality wise they go out of their way to get connected to me. So, but if I have those quiet, distant ones, many times I'll speak with them as we pass in the hall or do something to make some kind of a connection.

The same educator described a time when she reached out to a student which she believed was typical of her interactions with students. She sought to understand his feelings and she made herself available to him by providing him with an opportunity to

express himself.

... he comes through my class and he was very smart and just a character and loved ICU and all of the fast moving stuff.... he was that kind of a personality and the adrenaline would flow a lot better in that kind of a setting than it does in an academic type classroom and so to keep him going on the theory was sometimes a bit of a challenge. Well, so here he is a senior ... but he was not doing well in my class, he just wasn't doing, he was like getting barely "C"s on tests and I knew that he had brains to burn, I could not figure what was going on. So I thought and I brought him in and set him down and I said, "Is there any reason why you don't want to graduate?" And he says, "Well, why wouldn't I want to graduate?" I said, "I don't know. You tell me." He says, "Well, maybe I'd miss my friends." And I said, "Oh yeah, maybe you will." I said, "Your friends are going on. And they're going to go out and make new friends in the work place and you are too...." And he almost had tears in his eyes. You know, you know how you can see them, but he didn't really cry. But I knew I had touched a nerve and so I said, "You know I think, I think you're going to be fine and I think that you're going to have plenty of friends wherever you go. I know you love the people here and they love you, we all are happy for you to be here and be our friend, but you're going to be okay out there too." And do you know that his grades began to go up right away, just turned around. And so I felt like that was one time that I, that I really hit it right on. I am not always that fortunate.

The faculty member reached out to the student and tried to understand his world.

She did this by making herself available. The educators in this study felt that making themselves available to students was a component of connecting.

Being Available

The faculty members made themselves available in the both the classroom and the clinical setting. Being available to the students, in a variety of ways, was an integral aspect of faculty "being with" students. This faculty member spoke of an open door policy which she believes helps her to connect with students.

Gosh, I guess some of the things that come to mind is that I have an open

door policy. When I'm in my office my door is open. Students are invited, encouraged to drop by and long after they have me they continue to drop by, and just to say hello or tell what's going on. I think that helps them to know that I'm available. For my clinical lab students also I leave my home phone number with them, mainly because I have a Monday morning lab and it's a little difficult to get a message if they're sick or anything else.... Any way, so I think the availability and them knowing that I'm available probably helps to make connections with students. Being a ready resource as well, I have an extensive pediatric library in a number of topics and I think the student, you know I let them know that it's there and that if they have trouble finding things that I'm a good resource for that.

Another faculty member told a story about a student who was having difficulty in the nursing program. She and the student were spending time together in the skills lab in the evening. She felt that the student disclosed aspects of herself because she perceived the faculty member as being available to listen.

One student that will always stand out in my mind is when I was working in the skills lab and it was about 10 o'clock at night. And, we had this list of skills two pages long you have to check off, I had said to her, "_____, you have all these, you've done really well on the verbal ones, but the hands on ones you're having a hard time with, can you tell me why?" And she was from the South, and nobody else was in the lab and it was late, and usually there are crowds of people. And she said, "Well, yes Ma'am, I can tell you why." And I don't know why she choose me to express all of this to, but very quietly and timidly she shared with me a whole lot of her history, abuse that had gone on.... You know, for her to be able to open up that much on that one question somewhere along the road she must have felt an acceptance from me or that I cared about her, valued her in a personal way, otherwise I don't think she would have shared with so little prodding. And I think back on that and I try to think about the interactions I have had so that I can be more like that with others and create that comfortableness and that safety. And I think that the safety issue is a real big thing, not fear of rejection, judgement, and those kinds of things.... That was a real learning experience for me and thinking how we relate with one another and how we are communicating our caring in an accepting way.

Some of the teachers felt that students first perceived them as being available through their use of humor as a teaching tool. Faculty stated that some of the students felt more relaxed when laughing with their teachers.

Using Humor

Teachers often used humor to gain admittance into a common world with students. Faculty most often used humor to try to decrease the stress of a situation and demonstrate the lighter side of nursing. Nursing must be taken seriously, but a nurse must also be able to laugh. Faculty members were willing to tell stories, laugh at themselves, and use laughter to facilitate the growth of students. A faculty participant tells of trying to help students see that school and nursing have a lighter side and that it is appropriate to laugh and be human within the world of nursing.

I tend to lighten that up a little bit and I think that it works for me anyway. It works because I see the amount that they learn also when they're not as frightened of the faculty member, of, you know, doing something silly. I'm likely to sit there and say, "That's pretty silly, wasn't it." And they go, "I can't believe that I did that." And whereas with other faculty they might have a different approach of trying to hide it. With me they have actually come up and said, "You're not going to believe what I did today or what I didn't understand. I thought this meant this." and we'll get a good laugh out of it and then they've learned something from it, so a lot of humor.

Another faculty member has a certain humorous story that she uses when everyone is feeling overwhelmed. She recognizes that the use of humor often alters the atmosphere of the classroom. She uses the story to set a different tone for class.

I think what interferes with my connecting with them the most is the tremendous pressure that they are under just to do their (pause) carry their school load, their academic load with its clinical component and

everything, as well as the many other parts of their lives.... And I think that just the sheer busyness of trying to ... meet our appointments and do what we have to do, and be where we're supposed to be when we're supposed to be there with having done what we needed to do when we got there is probably a matter of time, as much as anything that interferes with that. But, there is a paradox as most things contain paradoxes, and sometimes I use that very problem, that's common to us all to connect with them by ... acknowledging it and saying, "Hey, we are all so busy." Sometimes I have a little, a very funny story that I save for a time in the quarter when I think we are all just working too hard and I walk in one morning and I say, "Look, everybody is working too hard and we got to have a little laugh." and I read this story. It probably takes me 10 minutes to read the story. And most people enjoy it and laugh and we connect that way.

The faculty members reached out and/or made themselves available when trying to establish a sense of connectedness. However, connecting started with their core beliefs about people and how one interacts with those they encounter. Faculty recognized the real and ideal aspects of nursing as well as the world outside of nursing where students lived. When faculty and student connect they inhabit a common world. But within that common world there are different types of connecting.

Types of Connections

There was the aspect of connecting in the intellectual sphere and/or on the emotive (personal) level. Faculty and student might connect in both the intellectual sphere and on the emotive level or only in one. Faculty members enjoyed both forms of connecting and found that each had its own rewards and difficulties. The concept of differing types of connecting between faculty and student was clearly stated by one faculty member:

I'm thinking of two different ways of really connecting, one is on a very personal level, as one human being to another, and for me that is a very natural connection because I think I do that in most aspects of my life. But for the student I can tell that it's unique that they can really relate to a professor which is not as common as I would like it to be. But the other way of connecting is intellectually connecting and that's what really excites me, the other is kind of commonplace to me it's what I do all of the time. I relate to families, patients, friends, neighbors, so it's not unusual for me. But the other is what I'm there for, and it's that sense of seeing the light bulb go off and thinking, "Ah ha, my fourth way of explaining this worked!" If I keep going long enough, I can come up with another explanation that suddenly, "Oh! The 'ah ha' of learning occurs." and that's very exciting for me. And when it doesn't occur it is very frustrating and there are times when I have run out of ways of explaining things and I've thought somewhere we're just not connecting. And when I can't grasp that it is very frustrating, very frustrating.

Faculty members clearly stated that there were differences in the ways they connected with students: intellectual and emotive (personal). Their categorizing of the differing types of connecting were reflected in all of the interviews.

Intellectual Connecting

Intellectual connecting is perceived when the students start to demonstrate an understanding of the concepts being taught or verbalize a deeper understanding of what the teacher is trying to communicate. The two themes of intellectual connecting are categorized as student demeanor and the interactivity of intellectual connecting. When intellectual connecting occurs there is a change in student behavior.

Intellectual Connecting: Student Demeanor

Faculty share their intellectual world with students both in the classroom and in the clinical setting. Through the sharing their information with students, they help students advance in the world of intellectual knowledge. When an intellectual connection

was made the teacher was often able to see an immediate change in student demeanor.

One faculty discussed what she saw when an intellectual connection was made.

...you see that look on their face. That look on their face, a sense of relief, or a sense of satisfaction as they finally understand. "Oh, I haven't understood. I've never understood that, but that really makes sense." and that type of thing. How it makes me feel? It makes me feel good that I've been able to reach the student.

The look of understanding was very rewarding. However, the faculty member who lectured did not always know what had happened in the clinical setting, but they spoke of the times when students had returned to the classroom after making an intellectual connection in the clinical setting. The students seem to have a heightened interest in the material being taught in the classroom because they were able to relate it to real life.

...sometimes they will start out in the quarter and it's almost like they're detached from me, from the material that we're studying. They're going through the motions, they're doing what they have to do but somewhere along the way, it's like they'll have an experience. Sometimes it's something that we study and talk about in class. Some times they'll have a clinical experience out there with their nurse managers and they'll come back all excited and tell about it in conference. And from then on you can feel that they're connecting, not just with me, but with what we're studying and it's like it finally grabs them.

The faculty members also verbalized the distinction between connecting with an individual and connecting with a class. The members of the nursing faculty found it difficult to connect with students in a large setting, like a lecture hall. Intellectual connecting sometimes occur during one-on-one exchanges, but it is most often described in terms of connecting with a class. One faculty member measures intellectual classroom connections by the responses she receives from the students.

The positive responses that there's been a moving along with you, or that they heard what you intended for them to hear. So there's that response from the class. And I think, just academically, if they do well test-wise that means that there's been some connection with the academic stuff with the class. You hold their interest. They're not all sleeping, or they'll come

towards the front of the room versus sitting in the back of the room, or they'll be attentive to time limits, break times.

Student responsiveness seems to be the key that illustrates that an intellectual connecting was occurring. There was more give and take between the teacher and the students.

The Interactivity of Intellectual Connecting

Many faculty members described the increase in the frequency of interactions between the teacher and the student in the classroom setting. There was a general consensus among the faculty members that it was more fun to teach students who were making intellectual connections with them and the material being taught. One faculty member described it as follows:

I think there becomes a little more animation. A little more give, a little more interaction than animation to that interaction. And I think that ... you have to be real careful that you don't ... focus on the students that are going to give you those positive experiences. And not keep trying with the others because it would be real easy to do. And then the students perceive it as, "Oh, you're playing favorites." And so there's that animation and that desire to want to spend more time and more energy with these people because you can get that positive feedback and that positive clicking interaction. But you have to be real aware of it in order to not shut off the rest of the class. And so it's like, it's a positive thing and it's fun, It's a lot easier to deal with people that are starting to click in and are excited about it and are and want to look in and want to process, than with somebody who's just sort of like, "Huh? What does that mean?" It's like, "Okay, let's go back and get it."

Intellectual connections that were more than surface connections were more fun for faculty members because the students were more involved and authentic in their behaviors and questions. One faculty member stated that she could tell when students are achieving an intellectual connection by the milieu of the class.

Physically you'll see them smiling, or feeling relaxed, or they're able to ask questions, and I tell them it's important for them to ask questions. I can see them responding to that and that we're connecting. Sometimes ... when you respond to them, I think you can tell that they're pleased that you listen to them... They don't feel like they've been put down or that they've not been listened to.

Another nurse educator talked about the warmth and comfortableness that she feels when she and a class achieve a connection.

I think [by] their warmth with me. And their comfortableness and their ability to share and do things. There's a difference in how they do their work. It isn't, they just get the work done, there's more concern and caring behind it. So, they seek you out with that, but at the same time while seeking you out they can act a little more independently too, so it's time that is used well.... I listen. I take time. I think I'm willing to ... admit when I've been wrong. I certainly admit to other points of view. I may place more stock in mine, but I believe in other people sharing different ideas based on their experiences. I think I help put students at ease because I use a lot of humor.... You know how with students every semester, you know, "It's only a test. This is not who you are as a person. It's just one part of your life." So I think that's the kind of caring and concern that I have with patients I also have with students. And trying to really help them through, what I think, is a difficult program, nursing.

One teacher uses a story about a student to illustrate how intellectual connecting and personal connecting can be intertwined to facilitate growth in a student.

As I was thinking about this study I kept thinking about a male student that I had probably about five or six years ago, who was a very serious, very prim and proper, and intense, student. He wanted to get all the pathophysiology, all of the facts. "Give me the facts." And his first day in pediatrics he was absolutely terrified and I assigned him, very deliberately, to a 7 year old boy... And about half way, and the student as I said was terribly, terribly nervous, at mid-morning I saw this student leaning against the wall. He came out of the room, leaned against the hall wall and sighed a big sigh. So I walked up to him and I said, "Hi. How's things going?" And he looks at me and said, "Oh my! What do you talk to a 7 year old about?" I looked at him and I tried to refrain from hysterical laughter, but the smile was evident, and I looked and I said, "Well, you

were a 7 year old. What were the things you liked, marbles, games, school?" "Oh! Oh!" And it was really like it suddenly hit him, "I do have a connection with somebody that's not an adult!" ... it really lit him up and he thought, "Yes! There is a connection here. I have something that I can work with." By the last week of the semester I went into a room and here he was sitting kind of on the bed playing checkers with a child that he was taking care of and I thought what a long way he had come from being this very stiff, very formal person that doesn't work with children, I mean you have to let the child in you come out...

Although faculty members were excited about the times of being-with students on an intellectual level, most of the faculty members also treasured times when they had connected with students on a more personal level. The faculty member in the previous story felt that she had achieved both an intellectual and an emotive connection with the student.

Emotive Connecting

Faculty members spoke of connecting with students on an emotive level as something that often developed as a result of their basic respect for individuals. Nursing faculty spoke of making an effort to connect with students in emotive ways. Emotive connections were described as those which establish trust, openness, a different level of disclosing, the willingness to spend time with each other, and being mutually supportive. The connections increased the possibilities of being, for those involved, as they gave meaning to the living of one's life. The themes of emotive connecting are categorized as being alongside, shared values, reaching out, and the openness of connecting. Individual connecting was manifest by a change in

... the level of disclosure, both from the student's standpoint as well as my standpoint, there's a sense that you've disclosed differently to this person.

And it's safe, something triggered in your brain that said, "This is safe. This will be productive. Perhaps this will benefit you. This will affirm you." So the level of disclosure that begins to take place is a clue.

The faculty member voices the need to feel safe as the level and type of disclosure changes. A sense of security is essential as the student and teacher move closer together.

Emotive Being Alongside

The emotive connections bring student and teacher alongside each other, rather than moving along a parallel course. The depth of the connection often begins with an increased level of knowing the student. The participants stressed that knowing students as individuals was important for them. One stated that connecting with students starts with something as simple as knowing their names.

I try to get to know the individual student. It starts out with just learning the name and calling them by name. Getting sort of a feel for, they all know me, you're one and they are many so they know you. And they know basically, I mean they come in your office and talk.... I try not to get real involved in personal life and in personal problems because that's not my job and that can tend to take away from the educational component that, that part of me that they need to get through the program. But if, as in the last course, we had one student whose mother is dying of cancer. So when she fell apart on the floor, you have to go find out what's going on and sort of have to work through with them. And I'm not afraid to do that and I know that some instructors are real uncomfortable with doing that. And making a few special allowances and making arrangements so that the make-up time is available and being available just to let them talk. Not to give them advice, but just to let them talk. Sharing personal experiences that are similar, that sort of thing. Being non-intimidating, and always willing to listen and (pause)...

The previous teacher started to know her students by learning their names. She was willing to become more personal with students if the need arose. Another teacher recognized that students came into a new setting with trepidation and sought to discover

the “who” of the student.

I think I try to go into a new situation accepting each student where they are. And though they may not be like me, or though I may say, "Oh, this student is much more task oriented than I would like them to be," or, "This student has some inappropriate interpersonal interactions in a specific situation." I try to accept them the way they are and work with that. I'm also a touchy person, which I think communicates acceptance and caring for them as a person. And I think they're more open to that when you somehow try to communicate that to them and not, I mean they may be a "C" student or they may be an "A" student, and I try not to have the same expectations of both, but have the highest possible expectations and challenge that one the higher student and yet still challenge the one that's the lower student. And I think that just valuing them as a person and for them to feel that I see a potential in them even though they aren't the top student is good and helps to facilitate that.

In the typical classroom setting, nursing faculty have difficulty getting to know the students and understanding the individual pressures that the students are experiencing. Faculty believe that knowledge of the student and the factors that may be influencing their ability to perform in school were important to their ability to connect. One faculty member summed it up this way:

I like to know the students outside of their student role because you find out all kinds of things. And it makes sense why they behave or why they say some of the things they do to their patients, to other faculty, to their peers, by knowing what they're like, where they grew up, know what other kinds of struggles they have.... they're the first ones in their families going through any type of formal education. And... sometimes I find myself thinking, "Well, they chose to come to this school. How come they can't get their acts together?" But, you know, understanding that they don't have those supports at home and they don't have people that talk a certain level of (pause). Their vocabulary for example, which limits them in how they can express themselves. So knowing that, I don't view them as less adequate or limited, you know, you can add that context to what you're experiencing with them. So getting to know students outside of their student role, who they are, where they work, where they live. I mean do they live in the same conservative town I live in or do they live out in the

middle of a city. Who lives in their houses? You know some of these stories these students tell me about who else lives in their home and it's no wonder they can't study, they can't sleep, they have those struggles. And then knowing that I think I'm just better able to offer advice and guidance that's more supportive versus something that can be perceived as punitive.... This knowing students is tricky and yet I think is a real fundamental piece to connecting with students.

Knowing students and reaching out to help meet the needs of the students was often a precursor to deeper personal relationships. But, before the deeper relationships were established, the faculty member and the student had to find an interest or commonality they shared. The sharing that lead to a deeper relationship often centered around shared or similar values and beliefs.

Shared Values

Teachers often remarked that they tended to gravitate towards students who shared similar ethical codes, priorities, or values. The joy of connecting with another human being was the first feature identified by this teacher. The joy of the connection is brought about by a change in the level of disclosure.

Here's another human being who has, who shares, who can share a level of life, whether it's academic, or religious, or even age kind of experiences as a single person or ethnically. You know it's kind of like a charge like, "Oh! Here's another person I can link up with in my world." So it's a change once it comes to your awareness that you've connected.

When beliefs were shared the faculty and student found it easier to be with one another.

One faculty described this moving toward one another:

Well, in connecting I feel that I have a good understanding of the student and the student has a good understanding of me. I think it has been more through clinical work where the numbers of students are small.... I think is due to in my perception, from me gravitating towards that connection

would be the interest of the student, a student who really wants to learn and who cares about taking care of patients.

Another faculty talked about an experience when she connected with a student in such a way that the student was able to develop a different perspective about a patient in order for her to know the patient as a person.

I had a student, a good student, very, very strong student, "A" student, somebody mature, but a good student. A good solid student. And she was taking care of a client who was a 40 year old man, who had a history of alcoholism, who was admitted into the hospital medical/surgical unit with a abscess on his flank.... a very deep, sort of messy wound and he required pain medication for a dressing change.... So the student comes out and tells me and I said, "Well, I'll come in with you." But before I do that the students says, "Well, the patient is kind of a whiner and we gave him some Ativan before the procedure." And I said, "Ativan! There's no pain relief in Ativan".... So this is a sick guy, okay? And this man is 40 years old, divorced, and you just sort of got a sense that somehow in the last 10 or so years his life has maybe been difficult, lost his wife, children are estranged, etc. And this student was so quick to label this client a whiner. So we leave the room and I needed to ask some questions of this student. So I said, "Look at all of the surgery he's had." And then came out, the alcoholism and the student was still sort of (pause). Not only was he a whiner but perhaps he caused some of his problems.... Well, it was interesting because we went back into the room, medicated the patient and so forth, and the student, I think began, just began to see the patient as a person, okay, just began to.

Well, as it turns out this patient was a co-workers of one of our faculty husbands. This student and this faculty member go to the same church. Suddenly this patient became a person and that wasn't the end of it.... And then the student began to get additional information about his work place and his and how fond he was of this faculty member. So it was an, "I know someone that you know" kind of situation.... And it was a week later that the student came back to me and said how she had reflected on that situation. How she had realized that she really didn't always look at the total picture and how much more there was to see in every patient.... I was very pleased from a faculty perspective that I had facilitated that, but I was also very I guess I think I was thankful and honored and also sort of thank God for giving me the skills to be able to do that. It was just a good outcome and but it was really multifaceted, the

whole experience. And it was fun and that's what I think I enjoy about my job. I mean that's a good example of facilitating connectedness.... so that was a good experience.

The faculty member had spent time trying to connect with the student in such a way that the student could look beyond the obvious to see the person and make a connection.

In order for a connection to occur the teacher and the student needed to be in a position to interact. Teachers often desired to help by making special arrangements for students who needed help, or by making themselves available to talk with students. The nursing faculty felt free to reach out to students when they perceived the atmosphere was tense. However, there were times when the faculty reached out students and the students seemed to be moving away.

Reaching Out

Nursing faculty believed that it was difficult to connect with students who were afraid and, possibly, not approaching them. Faculty members stated that one of the major reasons students would not approach the faculty member was fear. Faculty sought ways decrease the students fear and/or to encourage the students to approach. The following is a teacher's thoughts about students and fear.

Well, I have on occasion had students that were defensive or challenging, or made my heart beat faster just to be in their presence because they seemed angry or whatever in the beginning. And I'll confess that on occasions I have gone into my psychiatric nursing mode and sort of said, "Now, this person's anger is external to me." and calm myself in the interaction and deal (pause). And then try to listen where they're coming from, what it is, try to get to the bottom of what is the real question here. What is the real problem? If it's anger, then anger is generally secondary to hurt or fear or threat, and so where's that coming from and kind of go into that mode. And when I have done that on some occasions I would say

that I have disarmed them. Disarmed is not quite the right metaphor because it suggests leaving them weak and I don't think that is what I did on those occasions. I just, they seem to relate to me after that without fear. Without the need of that defensiveness and we could get on with doing what we had to do as students and teachers in the learning process.

Another stated her feelings about student fear in response to this question:

How do you know when you connect with a student or what do you see? What I see is that they have no fear of interacting with me. I see that they are in a position to perform and do something without falling apart. I see that they can do it, that everybody can for instance learn a skill, you just have to do it and I think if I sense, I always say I have my feelers out, if I sense that there is tension and that they are really scared then I tend to take a step back and not be invasive.

Another faculty talked about a simple philosophy that helped to decrease student fear and increase the opportunity to succeed.

I say, "Okay, now go get every thing out that you're going to need and set it up." And I also tend to prepare them for it before they even go to it. So my requirements for pediatrics is - - "This is when you are giving an IV med. This is what you have to do. You have to know your drug...." So that they have done all of that before they even come to see me. Because to stand there and try to figure it out with the instructor standing there makes the (pause) it increases that anxiety. They think it is busy work. I know that it's preparation so that they don't have to worry about it. So, they have all that and I let them go and do all of their equipment by themselves so that you're not standing there going, "Well, there's this (pause)." And they can stumble around on their own. So I guess that's what you do, what I do, is just to allow them a little more space to get organized before I'm there. That right to find things on their own without a instructor watching them stumble and then when it comes to the actual procedure, whatever, I tend to say, "Talk me through it before we go do it. Just tell me what you're going to do." So that if I identify an area where they have a problem it's before we go see a patient.

Faculty members are aware that they cannot connect with all of their students, although they put forth the effort. One faculty member talks, not only about the limited

ability to connect with students, but about how she reached out to a student to try and connect.

But out of a group of eight students ... I felt like I had probably connected real well with about five of them. And the rest were just sort of doing their (pause). Oh! And I did have another student in that recent rotation. She had a bad relationship problem happen right before the final and so forth. And she got permission to have her mega-care plan in late and we got that all taken care of. Then I saw her on campus and she said her problem was working out, but it was still difficult. And I said that I was thinking of her and so then I sent her a card. And it was just a caring card, caring about you and know that you can pull yourself through this. And I just wrote a note that she had good potential and that I think she would be happy that she had chosen nursing as a career. And then I got a call from her. She said, "I just got home from school and I got your note and that was wonderful. Thank you very much. It made my day."

The student had let the faculty member know that she was having difficulty and needed help. The student had disclosed her need and been open with the faculty member.

The Openness of Connecting

When faculty described a more personal form of connecting they talked of the level of disclosure, the nature of disclosure, the level of intimacy, openness and trust.

The sensing of mutual trust was a key element in the establishing of a deeper connection.

One teacher talks about connecting and trust this way:

... when you do connect then it seems like the student then feels more free or feels more open to come to you then with other kinds of problems they might have or they seem to trust you? It seems like that when you connect there is then a trust. And then even after they leave my rotation, then even on campus they'll come up to me and say, "Hi, ____." or, "It's nice to see you ____." They might even touch me or I might even give them a hug. That type of thing so I can tell that we've connected.

Another faculty talks about a relationship that continues to develop once trust and

a sense of connecting has occurred.

I think that the level of disclosure, both from the student's standpoint as well as my standpoint, there's a sense that you've disclosed differently to this person. And it's safe, something triggered in your brain that said, "This is safe. This will be productive. Perhaps this will benefit you. This will affirm you." So the level of disclosure that begins to take place is a clue. The kind of information you share, moving from the more concrete stuff to either the more intimate or emotional kinds of things.... the level of disclosure is a clue to me. And the returning, they'll say, "You know you said something and I wanted to follow up on that." The returning, the repeat encounters, because I don't think I've connected if it's more casual and it's a one time deal, but repeat encounters.

and she adds:

We'll ask more questions of each other or be braver to ask certain kinds of questions of each other, whether it's academic or personal, so there's that change. And this deliberate wish to stay in contact. There becomes this other level from which to interact. They're not just a student anymore, they will be my peer eventually, so there's that to factor in and what implications does that have? And how do we know what we'll be like together if we should? That's been a positive experience for me and I run into students on the units that say, "Oh, this was my teacher." It's a charge, again, that they feel comfortable working with you and so the comfort level changes. You're like bonded in a different way, you know. They come as these individuals you know nothing about and yet you have that chance to mold them and then they're your peers. In such a short amount of time they go from stranger to peer in a profession, that's an awesome kind of thing. So I think that changes and more knowing, it's just this whole notion of knowing at a different levels.

One of the nursing faculty member talked about the emotions and the reward of connecting that she has experienced.

It's very rewarding and you're able to help them. I think, for students, ... you're helping them have the tools to be able to use their inner core of values and priorities and what's important to them. And when you connect with them you've established that base.... It's very gratifying and you can see it and sense a sense of satisfaction from the students also. You get an emotional response. I think you get a lot of eye contact, verbal

affirmations, just (pause). How do you put it into words when you know that you have? There's just a lot interaction, of feedback, and just a good feeling. It's hard to specifically say how you know, you just know. I think you even know ahead of time before it's going that you have the potential with this student and when it happens it's almost like a culmination like, "Yes. I'm able to pass some of this on and they're receiving it." I think like I said earlier you just sense that there's a common ground, or a shared value system, or a shared importance, or a shared priorities, or they come from the same framework, or whatever of what's important in their nursing.

The above stories also portray how faculty members reached out to students to help them achieve or just to let them know that someone cared about them. It was often shared values that brought faculty and student together and increased the openness of their relationships. The nurse educators also made an effort to understand what was occurring in the students' lives in an effort to help the student. Faculty members told stories about the times that they and connected and about the times they have reached out to students but had been unable to connect with them.

The Unfulfilled Effort to Connect

In the previous section teachers described how they tried to decrease fear or interact in such a way that a connection was fostered. However, the faculty members also told stories about times when they had tried to connect, but had been unable to. They spoke of student's demeanor, the effect of previous interactions that students brought with them into the situation, and differing beliefs or value systems as things that interfered with forming a connection. Not connecting sometimes manifested itself to faculty through the demeanor of the students.

Student Demeanor: Evasive

Just as the demeanor of a student changed when a connection occurred, there was a demeanor associated with not connecting. The demeanor of a student who wasn't connecting was described by one teacher this way:

When you don't connect, well, there is no eye contact in the hallway and you know they know you. It's not like you're a total stranger. There's this turning away when you pass in the hallway, almost just deliberately. You don't have the returns to the office to see how you are, or the returns of asking for help as they look for a job, or other things they may need. You don't have that reciprocal kind of a interaction. I may still say hello in the hallway or say I notice them doing whatever, but it's not reciprocated, it's just one way. So you know that you haven't connected, or you may hear through the grapevine that, "Oh, _____ was real rigid." or, "She was real strict." You know those other things that students usually remember that have a negative connotation to them. So there's a cooling kind of effect.

Another faculty member stated she knew she hadn't connected with a student when:

. . . they scream at me! I think that you just, there's some non-verbal things that you notice, like you're both cordial to each other and you do what you have to do to get the information that you need or to get done with whatever you both have to connect. But it's not a fun time, like the time with a student, even sometimes I think if you're really working with that student to help them learn, so you're spending time in that way, it's just not as positive as it is, I think, with the students that I feel I connect with. So I think that there is a qualitative difference in the interaction that I have with them.

A nursing faculty tells of her efforts to reach a student and to help the student make an intellectual connection and the student's response to her efforts.

I had another student who didn't do well on the exam last summer and I worked so hard trying to help her with how to study. She was memorizing a lot and she had a hard time if the concept on the exam was a little bit, if it deviated just a little bit and she had to make a choice, she had a hard time making a choice between two that sort of looked alike. And then I had her again this spring and I felt a certain distance from her.... I sort of

kept on trying. I kept on trying. I thought she's just apprehensive, etcetera, etcetera, ... then at graduation, she introduced me to her mother and all that, which was fine I thought. And then she was telling her [the mother] about having me in the Spring semester because, and she said it sort of interestingly I thought, which made me think she was more angry and terrified that I thought, she said, "This woman! I couldn't pass this woman's exam and here I was going to have her again in the spring." And that made me very sad. Really it did, I've thought about it a lot in the last couple of days. But I will not let that happen again, or perhaps, or I hope I've learned from that too that I just need to do this a little differently if somebody has a real problem passing the exam.

When the faculty member sensed that students were not approaching them, it was often interpreted as hiding and/or a sign of a missed connection between the faculty member and the student.

Student Demeanor: Intellectual

Faculty felt that when they had difficulty connecting with students in the clinical setting it was generally due to a breakdown in connecting, usually in the intellectual sphere. Faculty members perceived a decreased desire by the students to indicate that the students were hiding from them. When the teachers had difficulty finding a student in the clinical setting, they believed that it might signify an inability to take theory presented in the class and apply it in the clinical setting.

I can think of a few students that really wanted to hide how poorly they were doing and so they become the wallpaper, the fly on the wall, and try to stay out of my path. And it's obvious after a little while that that's what they're doing is trying to keep themselves hidden so.

Another member of a nursing faculty discussed correlation between not connecting intellectually in the classroom and in hiding in the clinical setting.

In the lecture hall it's that flat affect. It's like there's nobody home. So you

know that something you're doing is not, what ever you're doing is not getting across or they all have a problem, one or the other. In clinical it's like you say the same thing over and over and over and they still don't get. Or you go to do the same procedure that you did yesterday and they haven't got it. "You know it's the third time we're doing this and you still don't have this." ... Sometimes you have to just sort of push. And you get the student that just does the bare minimum, hides in the corner and I tend to, and they know this, they've learned that I tend to weed them out. "Okay, come on. Let's find you something to do if you don't have anything to do. I'll find you something to do".

Classroom demeanor can also be indicative that an intellectual connection is not occurring. Teachers reported trying repeatedly to make intellectual connections with students. This teacher's story was typical of the faculty members effort to connect.

Well, in terms of a class as a whole sometimes you teach your heart out, you tell them, you give them an assignment to read, you do everything and the whole class demonstrates by objective tests that they're still not getting it. And so that's one day when you say, "Well, we missed it on this one." And so we have to start again and try to connect around the cognitive component of what we are trying to do.

One faculty member described a personal story of not connecting with a class and the pain associated with the lack of connection.

Well, I would say that generally one can assess or sense a degree of distance perhaps with the student, or identify that your relationship with that student is sort of based on objective data and what needs to be done for the course and course requirements and course related activities and any interactions don't go much beyond that.... I've been teaching three years full time here, where I've taught lecture as well as clinical and I think in my three years here every semester but one I have connected with my classes. And so the semester that I did not connect was a very painful semester for me. There were individuals, student related issues occurring that had never occurred in my situation. They were related to student failures and it just, the whole environment of the course changed and being at senior level there aren't generally a lot of failures here. Occasionally a student fails a course but not very often and certainly it was the first time in my three years full time that that had happened. And

what occurred as a result of that was, changed the whole environment of my course and it was very, very difficult for me. I mean it was down right painful and so I really knew what it was like not to connect or to actually have almost an adversarial relationship with a class.

Teachers were aware that hiding from the teacher or not approaching a teacher might be based on a student's description of them, a past history of unpleasant interactions with a teacher, or a resemblance of the teacher to someone else.

Previous Influences

Being aware that interactions with other instructors might influence the way a student approached them did not always help the teacher to overcome that previous influence. Faculty members tried to break down walls that interfered with connecting. One teacher stated although she had been successful in many of her attempts to connect, she told of a time when she had not been successful in connecting with a student.

Whereas I have had other students where despite what I've done to break it, I've not been able to do it. So I feel like I haven't connected. And I think, from my psych background, that part of that is not so much that person and myself in the interaction, but who I remind them of.

One faculty member had an encounter with a student because of an association with someone else. The teacher was unable to connect with the student because the student identified her with her mother.

I think that this student was probably one of my disappointing experiences with students.... I was trying to get her ... to tell me something about her write up. And I was trying to get her to feel more at ease and saying, "I know you know this because we talked about it in class." And she just didn't want to answer. And I said, "Well, we're just going to stay here until you answer it." And then she just got into this whole thing about how I was like her mother, reminded her of her mother who was also a counselor. And the way that I did that, which I have used with other

students, apparently was so aversive to her that it really blocked our interaction and she just could not get past it.... Whatever kind of difficulty she was having with her mother really got played out in that interaction. And that I think, her identification with the two of us was so intense that she just couldn't get past it, no matter how I tried. And I tried and backed off from her and tried doing other things and just giving her space and that, but it just didn't work.

As teachers related stories about times when they had connected or been unable to connect they were often reminded of their past. One nursing faculty member remembered being with her patient behind the privacy curtain and seeing only her teacher's shoes under the curtain. She remembered this after a student related a similar story.

I'm thinking mostly with my undergraduate students here, over the course of a semester in the beginning of course they're all nervous. You know, what's this teacher like? How's she going to grade us? Is she going to stand behind the curtain and peer in and see what we're doing? And they've told me that they've looked down and seen the shoes of their teacher under the curtain, which brings back not so fond memories for me too.

Another faculty member discussed how interactions with a previous faculty member and time available to make a connection could influence the possibility of connecting.

And then the part that really makes a difference with it [connecting] is how much contact you have with the student. How much time you can actually spend with them and also when it happens in the semester because, well, sometimes if you started with a good interaction, then you at least have that to fall back on. But if you've had somebody where you had more of a neutral interaction and then you have a negative interaction and you don't have that much time left in the semester to work it through then that's difficult. And I think that the real problem for the student is that they carry that with them to their next rotation. Sometimes they are not able to differentiate between what, "Well, this is one faculty person that I just didn't get along with or I had a problem with but it doesn't mean that they next one is going to be like that." I think they really go into the next semester on their guard unless they've heard positive things about

that faculty from the other students.... I think that some of them where they really have trouble with faculty and they're not going to take the time to see that you're different. And I think sometimes students get hurt, whether it's on their own or not, but they get hurt badly and they're not going to risk that interaction. You know, so they're going to just do, minimize the contact that they have with you and just do what they need to do and get through the semester.

Faculty members interact with students who vary in age and cultural backgrounds. What works with one student will not always work with another. Cultural preconceptions regarding appropriate ways to interact with those who are considered to be authorities can also influence the faculty member's ability to connect with students. This teacher describes how one's cultural background could impact the ability to connect with a student.

Just authority level that is innate with being student-teacher. I know that that's just something that they're socialized to and you know, "This is my teacher." I have some of my foreign students referring to me as "Teacher" instead of my first name. "Teacher this" and "Teacher that" and I think "I'm a person too. I'm other than just your teacher." But that kind of built in authority level.

Cultural expectation about relating to a faculty member was not the only limiting factor. Difference in language could also be a contributing factor when teacher and student were having difficulty connecting.

Sometimes the language. We have a lot of students where English is not their first language. And I think it's either my patience to try to find the right way to ask questions, or to demonstrate, or articulate your wish to know them. I may not be using the right words for them to hear that, so language tends to be a barrier.

Being reminded of another, or experiencing difficulties because of cultural were just some of the factors that interfered with the ability to connect. Not being comfortable

with each other, or having difficulty making a connection was often the result of differing priorities or differing value systems.

Differing Values

Nursing faculty commonly mentioned that differing values were probably the most important factor in not connecting with students. Differing values included the use of humor, one's work ethic, differing styles of communication, and the influence of one's culture. One faculty member told a story of how humor lead to not being able to connect with a student.

... a student without a good sense of humor is probably not going to connect with me. Actually, I've had a student a number of years ago, that wrote on my end of the semester evaluation that I didn't take nursing seriously enough. That I laughed too much. And I read that and I was standing in the office and I went, "Yeah, you guys, listen to this evaluation." and I read it to everybody there. But it truly was a reflection of a mismatch of personalities. That student would have done much better with somebody that was more, that was less humorous. I don't want to say more professional because I think I am professional, but that was her image of me, was that I was not professional because I used humor and I tried to make learning fun. I try to make patient care fun. I mean it ought to be fun for the child.

Differing values regarding the work ethic were a common contributing factor when faculty and student did not connect. Teachers often expressed frustration with students who did work up to the teacher's expectations. One teacher stated:

For me, I think students who, essentially, students who slough off, who don't work to capacity, although there are a few exceptions to that, I think. And there's just something else about them that I think that just tells me that I need to maybe nurture them a little bit more, that they'll eventually come around. You know, that kind of thing but I think it's essentially people who aren't interested. I think if they're not really interested in learning and they're not really interested in taking care of patients, ... some

people, students who come across as trying to use the system and not, there's not any give and take in it, they're just there to get whatever they can from you. Not in a helpful way either I think more in a user kind of way.

Another nursing faculty described a student that she perceived to be doing the least amount to get through the program.

I'll have students that, there are students that they're there to just get on with it, or they think they want to be nurse, or whatever and they really (pause). Yes, in fact, now that you mentioned it, I had a student like that in my last rotation. She seemed like a bright young woman, but she just sort of did the least she had to do. But yet she seemed very, very bright and she seemed to know, I had a feeling that she might work the system and get away with as little as she could, although she had the potential to do more.

Other faculty members talked about the difficulty in working with students who had a different work ethic. Often when a teacher and a student connected there was a sense of energy. The energy was not present when there was no connection. Differing approaches to work often made connecting difficult and hindered the development of an energizing relationship. One teacher discussed the lack of energy that resulted from differing perspectives and the reality of being unable to change a student's perspective:

You aren't able to, well, you just have to accept the fact, I guess, that they have a different, they're working off of a different focus or a different perspective, and they just aren't going to see yours. And while you can accept each other, you can accept the student and you can accept the situation and each express your opinions, you don't share that energy. And you aren't able to almost feed off of each other's energy and there's an acceptance and an acknowledgment. And there's no less of a, I don't like that person any less, but you just know that you're not sharing that experience in the same way, you aren't looking at it from the same perspective.

This faculty member identified differing styles of communication as a hindrance to connecting.

Values, often. Beliefs that they have. If they, no social stuff or anything like that, but sometimes if they're, if they have a philosophy like they don't allow patients to grow or do it their own way. They have sort of an authoritarian type kind of attitude toward patient care and if their background has been like that it bothers me. Attitude, sometimes, I think... I had a student last semester. Oh, he had some problems that he needed to be confronted with that were outside the realm of actually studying, but it was a safety thing. And I had to tell him that and I did,... he seemed not to make eye contact at the time that I told him, he wanted to get out and so he did.... And then in clinical on our final evaluations he said that he just didn't agree with my teaching style at all because he wanted people to tell him what to do and he just learned better that way, etcetera, etcetera. So it sort of really took me by surprise and I wanted to say, "Well, tough."

One faculty member talks about trying to reach a student but being unable to do so because of cultural beliefs. The teacher wanted the student to discuss the impact of a patient's death and the student wouldn't.

I know students I have not connected with, I can tell and in a couple of experiences tend to be a cultural thing too, and I think it has to do with what's important to them. I had a student who was, it was like her second time in the clinical setting, she was as Asian girl, very, very bright, and very warm, but expressing feelings and how things affected her just was not, she did not do that. She'd been there a couple of hours and her patient was a young woman and went into full cardiac arrest and they coded her for several, it was probably two hours, and then the gal died. And this was someone you didn't expect to die. She was awake and talking to you and then two hours later she was dead. And I pulled the student aside and said, "How are you doing?" "Fine." "Well, how can you be fine? You've just gone through a death and this is a new rotation for you and a new experience, critical care." "Oh, no. I'm fine." And I spent a significant amount of time trying to get in touch with how really she felt about the situation and never really could get her to that level of being comfortable with sharing how she felt. And how, maybe, she impacted this woman in her last couple of minutes or whatever before she coded. And I felt frustrated because I could never get her, we never seemed to connect on

that level. I took her aside several times throughout the day. I told her that I knew that it might not be culturally acceptable for her to express her feeling, but that we, as nurses, needed to be able to express our feelings and be supported through difficult times.

Faculty members discussed the stress associated with being unable to establish connections with students, although they realized that connecting with all students was not possible. Faculty members were encouraged when they were able to connect with some of their students.

The Cost of Connecting

Faculty members discussed the personal cost of both positive connecting and being unable to connect with students. Connecting did not develop in a vacuum but was the result of effort. Connecting often brought with it a sense of energy, while not being able to connect tended to drain one's energy. However, even when the connection was positive it required energy and time to maintain the sense of connectedness. The participants acknowledged that the cost in time and energy often made connecting difficult. The cost of connecting was discussed in terms of the time required to connect and a physical response when connection did not occur.

Time

Nursing faculty were aware of the extra time and energy it took to develop the deeper personal relationships that sometimes occur with students. It took their time and energy as well as the time and energy of the student. One faculty member stated:

And I think of that with other students too, particularly students that

you've had who are really quiet, that you, that I probably should go out of my way to do something with them, but it is just not as easy, for one thing, you know you just have to spend more time and energy. But I think that's the way it would be, it would be that I would spend more time and probably be more, it is probably a change in the way that I interact with them, that I talk with them, more on a friend, not a real friend kind of level, but how you just share things with people. You just talk differently, I think, to people that you know a little bit better and you might care about a little bit more. And I think that is also in the sense of where you might tolerate things more from somebody, you know from a student you feel like you've made a connection with or that they're trying or that you're more understanding of their behavior than you might be of other students who do the same kind of thing.

Another faculty speaks of needing the willingness or desire to connect, in addition to the time to connect.

I think, the faculty's willingness or desire to have connections with their students, to have that level of relationships with their students. You know, there are some times those semesters where you are perhaps less connected, just by virtue of you have so much to do that you don't have really quite the time. I will say though that there's, I will always kind of take a look at my students and say, "Is there somebody that maybe really needs, there's somebody in true need, and some how you'll make the time regardless to attempt to make connections with that student." And I think here at (deleted), it being a Christian university, there's a general, that's one of the things that I like about working here, is that's considered an, that's an important part of your faculty role and I like that.

One faculty member judged the probability of connecting by the time she was willing to spend with the student. Students often sought out the teacher to spend with them.

However, the faculty member was not always willing to give the student the time the student desired.

I think, the way I read it which may be right or wrong, is that they seek you out. That you can tell that they are listening to what you say and that they come back and give you some feedback on the value of what you did or didn't (pause), you know, if you were helpful to them or not, so those

kinds of things. Also I get notes from students and sometimes what they write on your evaluation, or a little card they sent you, or sometimes a student will contact you after they finish the program and share with you in what ways they think they have connected with you and how you've been a help to them in the profession and as people, too. Really, more that and I think those are the major kinds of ways that I judge that, if I want to spend time with them. Like some students I have connected with I don't connect now. They come in the office more than I want them to and some of that I think is not that, you know, it's just the chemistry isn't there. I mean there's nothing wrong with them or that but, it's like what you had with your friends in college and that there's some people you would rather spend more time with than others.

Another teacher talked about having the desire to connect, but not really being able to pursue connections at the present time because of a current over-load demand on her time.

Time. Now that I'm a student also I can't just hang around with these student events like I could. I don't volunteer as much as I used to to assist with student-run kinds of events. So time is a factor being a student. And some of the demands just with the work of the school, you're on committees and you're on, we're in the midst of a curricular change, so there's just those things that interfere with the time that you have. You just have different priorities. I need to finish school and I just can't hang around like I use to or volunteer to do things. Perhaps academically, too, just in terms of rank advancement there are other things that are valued that do not include those hanging around kinds of things with students. To produce scholarly work is a factor and you have to choose what is needed now, trying not to sacrifice the other benefits of being connected. But I think too, the students understand and that's kind of the up side of being a student again. They tend to feel more comfortable talking about student issues. Time's a factor, work of the school.

Time and desire seemed to be key ingredients in the formation of student-teacher connections. When these were wishing it was hard to develop a deeper relationship. Sometimes it was difficult for the teacher to develop a connection with a student because of an intuitive sense that took the form of physical discomfort.

A Physical Reaction to Not Connecting

It was interesting that nursing faculty often associated being unable to connect with students and physical symptoms. The descriptions of two faculty members were typical of the stories associated with an intuitive discomfort. The first story provides a correlation of symptoms and student behavior.

... if I'm not connecting I feel uneasy, maybe even physically, maybe nauseated or a little something in my stomach that I'm not picking up what's going on or else there is some potential dishonesty or something between the student and myself. And I'll feel uneasy about that, but if I connect with a student I know where they are, I know where I am, and I'm easily able to converse with the student about whatever the topic is.... I'm nauseated, personally, I mean my stomach is what gives me a real clue to what's going on around me. So, you know, I have physical signs, I also generally think or feel in my head that uh, (pause). Usually if I'm not connecting with somebody it's because of a personality or a something about that person grates on me or there's a (pause). You know what I'm thinking, "Something's not right here." So it's partially a thought process but very often a physical entity.... Well, dishonesty is a big one, although it doesn't always, I mean I think I've probably connected with some dishonest people. I have and I got confused, I mean, they confused me. But on the whole I think that I can pick that up. I think if I receive, especially from a student, but anybody really, a feeling of apathy or judgement, a judgmental attitude, or non-caring kind of thing that I won't connect with that person. Or I'll make a real effort to connect with them so that I can maybe turn it around, but you know I'll have difficulty with that. Lack of interest interferes. I think that's mostly it. A judgmental attitude is really a deterrent.

The second story illustrates how the faculty member is aware of the physical discomfort and then tries to identify what is triggering the discomfort.

Deep in my gut. In my gut I just know that somehow the two of us, personality is not doing it and it's just a gut feeling, probably if I analyze it I can look and say that student doesn't reveal, isn't transparent, doesn't come to me, approach me for things. I can think of a few students that really wanted to hide how poorly they were doing and so they become the

wallpaper, the fly on the wall, and try to stay out of my path. And it's obvious after a little while that that's what they're doing is trying to keep themselves hidden so. I think the vast majority I connect with, but those are the behaviors that I see when I'm not and it's just my gut instinct.

These two teachers were cognizant of a physical discomfort associated with not connecting before they were able to give voice to the reasons for their discomfort. It is through the use of language that we can make known to others what we are experiencing.

The Language of Connecting

Language occupies a prominent role in being able to describe all aspects of connecting. It is through the language that the faculty used in telling their stories that we are able to gain an understanding of their experiences with connecting. Nursing faculty communicate the phenomenon of their everyday, lived experiences of connecting with students through language. Language and interpretation are used to make the everyday evident to it's self and to make it's self visible to the world (Heidegger, 1962). I found the words that the faculty members used when describing the phenomenon of connecting to be fascinating. I believe that some of the language reflects the energy and power of connecting and for this reason I would like the reader to enter into the faculty's world of language. The participants' language will be discussed in terms of the energy of language and word pictures used to describe connecting.

The Energy of Language

When faculty members spoke of connecting it was interesting to listen to their choice of words to describe the effect of connecting. Faculty used words like energy,

plugged in, and dynamic. When one faculty member was talking about feelings associated with connecting she stated:

Then I really feel dynamic and I feel we're on the way.... I really do and it's painful sometimes if you do. I mean it's more (pause). How can I say that? You sort of experience part of their life, in a way. You sort of think, "Wow!" and it's not that I incorporate it totally, because I don't, I really don't. But I will try to help them as much as possible.

Another faculty member used words denoting energy when she described connecting with a class.

You just get a lot of feedback. They seem to really plug into what you're saying and they question you a lot.... because they feel the same way you do but they want to know why and you're the authority at that point. So if you can give them credibility into why they already feel that way, that really starts to build the connectedness and gives them some tools to use, you know, how they are and how they are going to practice their nursing. But I just sense a lot of eye contact... it's an active class that is participatory in their responses, and it may not be necessarily agreement, there may be some challenging going on and that's okay, but at least they're plugged in. You can sense that they're plugged into what you're saying and some where it struck a cord and is touching something that is important to them that they either want to expand on or learn more about.

This teacher uses action words to describe both connecting and not connecting.

Well. It's that special spark. It's like -WOW! We did it and you know they got the point. They understand what you are trying to get across. There are so many times when you feel like you feel you're hitting your head against a wall and they look at you like, "Huh?" And you know it's so simple for you that you just can't seem to get them to pick up on what you are trying to get them to process through on. So when you finally get that connection and it's like you've climbed Mount Everest and you've stuck the flag in and you've made it. Okay, now let's go from here, and it's sort of like a light goes on in their eyes and it's like, "Oh, yeah, well, I can do the same thing over here and apply it." And that's even more exciting because they got the idea that finally you can take a concept here and apply it to each situation that you are going to run into even though the situations are different. So, that's like a thrill. It's a buzz. And that's what

you really push for, not just to learn the facts, not just to learn, no but to get them to be able to take those facts and apply them and to make the leap to the individual patient that they are caring for.

Another faculty member tells of the impact connecting has on her life.

Oh, it's energizing! It's just kind of (pause). Here's another human being who has, who shares, who can share a level of life, whether it's academic, or religious, or even age kind of experiences as a single person or ethnically. You know it's kind of like a charge, "Oh! Here's another person I can link up with in my world." So it's a change once it comes to your awareness that you've connected.

The energy and power of the language used by faculty members to describe connecting provided insight into their concept of connecting.

Word Pictures for Connecting

Insight into the concept of connecting was also provided through word pictures.

The participants in this study were asked to provide a word picture, a description, that for them illustrated the concept of connecting. The most common word picture for connecting on an intellectual level seemed to be seeing the light or light bulb go on.

Well, I guess it would be the, intellectually, that light bulb that turns on where somebody finally understands something and as a teacher you flipped the switch for them. You really helped them to do that, so that would be the intellectual metaphor.

Another faculty member stated:

And then there's some days when you're talking about something and it catches the interest and you can see the lights going on. Like, "Oh, yeah you know I had a patient like that once." And if you can get them to talking about it and applying it, then there's that positive interaction. But you have to be willing to let go of the lecture notes and let go of your plan in order to let them run with it, so to speak.

Another teacher described it this way:

The light going on, probably that would be a good one. That a light goes on. I've often said that, I say that I've always enjoyed teaching first year students, the beginning students. There are people who just can't stand working with beginning students. And I say I like to because it's so fun to see them blossom. You can just see the lights come on and you can see them opening up and they've got that sort of, "Ah ha!" Or you see them grow.

Another major concept mentioned by the educators was connecting as a type of bonding.

I think, I think that when you really connect on an interpersonal level with students or with patients that it.... had something to do with respect because I don't think you can really, really connect at an interpersonal level without some degree of respect for that person as a human being, with dignity, with their own uniqueness and.... I guess a bonding, bonding, something like that. That it's that sense of really caring. The invisible bonds.

Another teacher says:

It's almost like a bonding when you've connect and you have that as your history and now you know that you share that prospective or you share that common ground. And I think that you seek that out and you try to recreate that in other situations and, and I find that those students when they have a similar experience and they need someone to share it with they come back because they know from me that I will share that with them. And they can get feedback or affirmation from me because they know where I'm coming from and they know that that's important to me. And you know that students, even two years down the road, will come back and say, "Oh! I had the neatest experience with a patient." or whatever and share that with me.

Two members of the world of nursing education spoke of warmth and enlightenment when asked for a word picture.

I think for me like the sun warming you, a warmth and the sun being like the light. Some how those two are connected, the warmth and the light

coming together where you feel, "Oh yeah. This is enlightening. I really feel this from you, but yet it's also a real warm feeling of acceptableness" I would say it's like the comfort that comes with the warmth of the sun, the warmth of the sun coming over you.

This faculty member added enlightenment, joy, and pleasure to her description.

A word picture would be joy, would be enlightenment, would be pleasure, would be umm umm. How come I can't think of more? I should be thinking of more. Word picture? It's all positive, I think. That's all I can think of right now. It's like a matching. It's like a flow of energy and you have opened the gate to do that....

Another faculty member simply said:

Sitting and telling jokes together and just laughing until we hurt. That would be the best. The very best.

Probably the following account is the most imaginative word picture.

Well, the thing that comes to mind immediately, probably because I saw this somewhere earlier today, is the rainbow because there is this coming together idea. I mean in scientific terms you can talk about refraction and the prism stuff. And this coming together and producing, hopefully, a beautiful picture or a beautiful experience and there isn't a specific measurement of all of those components that need to come together. I think there are basic elements, but the proportions of those that might be seen, like with a rainbow there's more sun or if there's more rain, or whatever. So I think today that the picture of the rainbow that coming together at different levels. You know those colors can represent different levels of being to produce something that is pleasant to look at. So I would chose that today.

Words describe the essence of connecting for the faculty members interviewed.

They have used language to describe various types and kinds of connecting, successes and times when they were not so successful. But perhaps the most interesting language emerged when they were asked: "Is caring part of connecting, or is connecting part of caring?" I asked this question purely for the fun of asking a philosophical question, in

addition to being curious about how they would answer the question.

The Philosophical Responses: Which is First?

Faculty members seemed to talk in circles when trying to decide whether caring was a part of connecting or connecting was a component of caring. There is no right answer, but the common decision was that caring and connecting are interrelated.

Caring Precedes Connecting

The faculty members had not known that I was going to ask about the interplay between caring and connecting. The answers they offered were spontaneous and insightful. Caring did not automatically lead to connecting, but generally caring preceded connecting. It was possible to care about another without a connection forming. The first response was usually that caring precedes connecting.

That's an interesting question. Well, I think caring would be part of connecting because I think you have to care about someone to connect with them. And I think that even in the examples that I used where I didn't realize that I had connected with the student I think the fact that I cared about that student, as an individual, helped that connection to take place. So I think I would really see it that way, that caring is part of connecting. I hadn't really thought about that.

Another said:

Well, let me talk this one out. My first reaction is to say that connecting is part of caring because I can care for a patient or a student without connecting to them.... And the occasional student that that holds true for. And I would like to think that I could still render good nursing care with positive outcomes to the patient and that the student can also learn despite there being less than ideal connection. So, yeah, I'm not sure that the reverse, obviously it would be ideal is to connect and have it all be together, but I think you can do caring without connecting.

Can you do connecting without caring? I don't think so. I don't think so. No, no now that I've talked that through. Different kinds of caring, because I think I can, intellectually, be very excited that the student gets a concept and maybe not even know that student. Sometimes in a lecture hall we have in our school, usually six labs of 10 students each, but I lecture to all 60 of them. So the degree of connection is stronger with my lab group then it is with a whole lecture hall and some of the students, in lecture I may not hear a word from them all semester and finally they'll say something and yeah that feels good. But I'm not sure that we really, really connect. Or I don't know, I guess that we've connected.

This response was from a different nursing faculty member.

My experience has been that caring has lead to connecting. I can speak from my experience. It takes energy, I mean physical and mental and emotional kind of energy to be in tune with what people might be perceiving and to be in tune to what you need from people.... I do this because I need it as much as I think they do. And so I think that the caring comes first, of my needs as well as the needs of the others, before I can connect. I mean you can connect, there are all kinds of connecting you can do, and it could just be rote kinds of behavior or a learned thing, but the true satisfying, affirming kind of connecting is fundamentally based in some belief in care for both parties. And I didn't think of that so I'm just speaking. This idea of caring for yourself in connecting is (pause) yeah, that's something I need to reflect on some more. But that's my experience with connecting, you got to care about putting in that time and that energy to connect and to finesse it. Sometimes it doesn't work, I mean you learn from doing that what fits you and what fits different groups of people. And so it takes energy to attempt all of the dynamics.... So if I just wanted to connect and didn't really care I don't think that I would put in that kind of energy. So I believe that caring needs to be there.

Another faculty member described the dilemma this way, realizing that connections do not always occur.

I think that (pause) is caring part of connecting? Is connecting part of caring? I don't think that connecting is part of caring because I don't think I connect with everybody I care about. I care about every student that walks through the door and I don't connect with every student. So I think that in order to connect you have to care. So I would say that caring is part

of connecting. I think that I don't connect with everybody that I care about.

She went on to make a subtle distinction between caring and connecting.

But that I do care about everybody that I connect with. I really think that caring is part of it. I just don't think that connecting always happens.

Other faculty members felt that connecting was part of caring.

Connecting is part of caring. But, yet you use caring behaviors to in order to connect so I suppose that there may even be some reciprocal relationship between the two concepts. But I think that the beginning of it is caring enough to connect, so I would start with caring. I believe.

This nurse educator thought connecting was part of caring, but you have to care first.

Is caring part of connecting? Is connecting part of caring? I think connecting is part of caring because I think you have to care in order to want to connect. Whereas you can sometimes, inadvertently connect, and perhaps subsequently care. But I would say in general, that you, in most cases (pause) I don't think that they are mutually exclusive. But I think in most cases if you care you are more likely to make, to facilitate connections. That would be my philosophical response.

Faculty members had difficulty in deciding whether caring was first or connecting came first. They did agree that there is a link between caring and connecting.

The Interrelatedness of Caring and Connecting

Faculty members addressed the interrelatedness of caring and connecting. Their descriptions demonstrate the interrelate nature of caring and connecting.

Well, my first response is that they are so interrelated, but I think that caring is part of connecting because if you can't, if you don't care you can't connect. Because everything becomes mechanical and there isn't an element of that you really care that they will be good nurses. That you really care, if I don't care about the patient and about them, to me I don't connect with them, I'm very superficial with them. I just want to get out of there.... I think that it was important that caring and connecting are

interrelated. I think that was very important to talk about because if you're burned out about teaching and about life and about dealing with patients you don't care, so you don't connect, so you're on automatic and you're just doing a task or a skill. And I think caring is healing, to me, and patients and students they need to learn that especially if they have not had a lot of caring in their life. It is a joy that comes back to you again, after they go to work and they are glad to see you and they drop you a note and all that. So I think caring is extremely important as part of connecting. So I wanted to emphasize that. I think you walk a very fine line if you care for students because there are students who may, I don't think they misinterpret it, they just, it's depending on their boundaries, they want to tell you everything about their life and that's not necessary. But I have learned how to move around in that and focus, and refocus, set limits, set boundaries for them. It's all by modeling, I think that's very important and I sometimes, I may go to the cafeteria or to the gift shop and get them all a chocolate kiss or something like that, something very small, something that's just, sometimes it's just words and that's fine too. But I guess I come back to caring all of the time. You have to care for your students, if you don't care for your students you don't connect. I feel that very strongly as a component.

The other faculty member stated:

If I have to make a choice, even though I think it flows back and forth, I would probably say caring comes first. Caring is in a way expressing acceptance and I think that leads to a connectedness. On a first basis it is very hard to just instantaneously connect, you have to sense some sort of caring about the other person. And how that caring is expressed will vary because I've met a lot of different types of people that I've connected with, everybody's not touchy, feely, but there seems to just be an attitude of, "I can say or do what ever I want and they will not judge me regarding that." So it's not necessarily a personality type and they may not even describe it as caring. But I think when you feel valued and accepted you feel cared for at some level. So I think that that has to come first. I think that does but then it does flow back and forth. That would be my choice.

Nursing faculty members believe that there is a definite association between caring and connecting. They may have been unable to place caring and connecting in a

specific order, but they did agree that one could care about a student without developing a sense of connectedness with that student.

Summary

The participants of this study were faculty from five nursing programs in Southern California. As I have listened to and interacted with their stories I have been impressed with their desire to humanely educate those who will be the nursing leaders for tomorrow. The desire to connect with students grew out of these faculty members' philosophy of life. Their philosophy of life influenced their belief about people and the way people should be treated. The participants' philosophy also guided their approach to teaching and their revealing of aspects about themselves. The nurse educators valued each student as an individual with differing backgrounds and patterns of interacting. Sometimes the differences fostered connections, while on other occasions they hindered connecting.

Connections occurred in two arenas for students and faculty. Many of the connections occurred in the classroom and were described as intellectual connection. Other connections often took on a more personal, emotive level. Both types of connections required an outpouring of energy and time. When faculty told stories about times when they had connected with students they identified being available, willing to spend time with students, reaching out to the students, and using humor as key elements of connecting.

Faculty members often spent time trying to make a connection with students that did not come to fruition. Often the wedge that kept them apart was differing value systems. Connecting was often inhibited by preconceptions held about the teacher, the class content, or the student's values or culture.

The stories told by the nursing faculty members demonstrated insight into the energy associated with connecting. Conversely, one loses energy and drive when there is no connection. Through the use of language, the participants revealed parts of themselves and the relationship between caring and connecting. Faculty members could not always untangle the precise relationship between caring and connecting, but they were convinced that connecting was important in their lives. They found connecting to be affirming and energizing.

The nursing educators willingly told me their stories. It is their hope, as well as mine, that these stories will be useful in the education of future educators. One faculty provided this wonderful statement:

The bottom line for me is to never give up my humanness and never lose sight of the humanness of the student. That I'm a human before I'm a teacher and they're a human before they are a student. And we've got a job to do because we are in a student teacher relationship and we have to do that, but we're going to do it as human beings and that means recognizing joys and sorrows, and struggles and triumphs, and the whole thing.

Who we are and how we present ourselves to the world are often a reflection of our core values and beliefs. Within the world of nursing education, it is essential that we live and act caringly toward ourselves, toward students, and toward those we serve. We must remember that first, and foremost, we share our humanness.

A Personal Response

In the stories shared with me by the nursing faculty and the repetitive interactions with their stories inspired the poems that follow. The poems are my personal and emotive response to the stories of the teachers. To me, the poems were a way of symbolizing the richness of the stories and the caring of the nursing faculty who participated in this research.

TEACHER, TEACHER

Teacher, teacher
 what do you teach?
 Do you teach confidence, worth, and peace?
 Or do you teach facts just out of reach?

Teacher, teacher
 Do you feel the struggle within my soul?
 What do you see as your role?
 Is it to help or you control?

Teacher, teacher
 Can you help me be free to laugh?
 Can you ease my way on the rugged path?
 Can you help me learn of strengths that last?

Teacher, teacher
 I must know, are you safe for me to show
 the dreams and hopes that help me grow
 or must I be just one in a row?

Teacher, teacher
 I have seen your outstretched hand,
 your own concern and feet of sand
 I have learned of power and strength,
 of self and giving and caring at length.
 I do not walk the path of learning alone
 for you've said together we've grown.

STUDENT, STUDENT

Student, student
 For what do you yearn?
 Do you have a desire to grow and learn?
 Or are you here because it's your turn?

Student, student
 Can you see how much fun learning can be?
 And that the answers are in you and not in me?
 I am but a guide so that you can fly so free.

Student, student
 Let me help you on your way.
 Let me stand beside you for a day.
 And rejoice as you grow as you may.

Student, student
 Do you know that I struggle too?
 How can I help you grow to a total you?
 So that you may develop your brightest hue?

Student, student
 Struggle and trust not in vain.
 For though the cost of growth is often pain,
 There is much from growth you will gain.
 I will be with you until you stand by yourself.
 For as you grow you will gain in wealth
 It is not a worldly gain, but in faith and trust in self
 A precious gift of timeless wealth.

CHAPTER FIVE

DISCUSSION OF THE FINDINGS

This chapter will link the major themes identified in Chapter Four with literature and the concepts of Martin Heidegger. The view that teachers have of themselves and their ways of being in the world comprises the first section of this chapter. In the second portion, the types of connections that occur, intellectual and emotive, will be discussed. The third area of discussion will center on being unable to connect, followed by the cost of connecting and the language associated with connecting. The philosophical interrelatedness of caring and connecting will comprise the last section of the discussion. Appendix F provides an insight into the development of coding using Heideggerian thought.

The Role of Heidegger

I will briefly discuss the development of hermeneutical phenomenology. This discussion of Heidegger evolves from a journey that I undertook to familiarize myself with the thoughts of Heidegger which, in turn, contributed to my growth and the aspiration to understand what it means to be a teacher. In his work I found the grounding to seek an understanding of what it is that teachers perceive that they do that makes a difference in the lives of students.

Martin Heidegger sought to explain how it is that humans interact with each other and become aware of, and interact with, the world in which they live. Hermeneutical phenomenology is the study of Being, of that which is and needs to be illuminated (Heidegger, 1962, 1971, 1972, 1975). Although Edmund Husserl, with his development of transcendental phenomenology, is the classic initiator of philosophic phenomenology (Dukes, 1984; Sandelowski, 1986; Thompson, 1990), it was Martin Heidegger who developed the basis for hermeneutical phenomenology. The terms “hermeneutic phenomenology,” or “Heideggerian phenomenology” distinguish Heideggerian hermeneutics from Husserlian transcendental phenomenology (Thompson, 1990). Hermeneutical phenomenology guided the interpretation of stories provided by the nursing faculty members.

Teachers As They See Themselves

Ten nurse educators provided insight into the phenomenon of connecting through their participation in this study. Their stories reflect many years of experience and many interactions with students. Although I asked the nursing faculty members to tell me stories, I was well aware that the lived world of teachers can never be made completely explicit. However, the stories of the nursing faculty members can provide glimpses into their teaching practices that might have otherwise escape notice. In order to gain an appreciation of a person’s actions and values, the person must be studied within the context of their world (Leonard, 1989). To perceive the being of the teachers one should

seek to understand their world. We start to understand the teachers' world by listening to them speak about who they are and what they believe (Diekelmann, 1990).

Their Natural Way Of Being

Being deeply connected and being unable to connect at all are at the extreme ends along the spectrum of connecting. Many of the participants perceived that the origin of connecting with students was reflective of the manner in which they interacted with all human beings. There are students that faculty members have interacted with throughout their careers that have been the recipients of the caring nature of the participants. However, not all of the caring interactions fostered a deeper sense of connectedness. Consequently, some of the students have been cared for without the teacher cognitively evaluating their every action (Baker & Diekelmann, 1994). Dreyfus (1991) stated "... that we often experience ourselves as active yet are not aware of what we are trying to do. Such unthinking comportment seems to be at least as typical of the activities in a normal day..." (p. 94).

For the participants their way of being with students was the part of the everydayness of their existence. These beliefs guided the way they conducted themselves and how they interacted with others. Cohen (1993) would depict the faculty's beliefs about mutual respect, personal uniqueness and dignity as those beliefs which will humanize nursing education. It is through understanding and respecting each others uniqueness, that the humanity of teacher and student merged into a joining that had not previously been present, into a fusing of a new horizon (Heidegger, 1962). Teachers and

students are never left untouched by their interactions with others. Through encounters, faculty and students, experience the history of their past, the impact of their present, and the possibilities of their future within the world of their society and culture (Heidegger, 1959, 1962; Leonard, 1989; Munhall, 1994b). All that had occurred in the lives of faculty members was brought into their interactions with students and guided their actions.

Being Themselves

The teachers interactions were based on personal beliefs and they discussed the need to be “themselves,” to be true to their concept of what a teacher is and does in order to have the possibility of connecting with students. As nurse educators, the participants believed that they exist in a caring community and who, though caring, model care as a way of being. Nursing faculty thought that nursing is a profession that is centered on caring and that most of them felt that their colleagues cared about them and the students. The participants also believed that the interactions among faculty members and with students modeled caring as a realistic component of nursing. The caring nature of the participants was reflective of a statement found in the work of Miller, Haber, & Byrne (1990). “For faculty, caring is the essence of the student-teacher relationship. They say ‘If we don’t care, how can we expect students to care?’”(p. 130).

The faculty members expressed their need to be real, to be who they are, to be authentic. Authentic being is a characteristic of the way one lives and interacts with themselves and others. Authentic self allows for the presentation of self in light of the

possibilities of being (Dreyfus, 1991; Heidegger, 1962, 1988). Heidegger (1988) stated that “each one of us is what he pursues and cares for. In everyday terms, we understand ourselves and our existence by way of the activities we pursue and the things that we take of” (p. 159).

Boykin & Schoenhofer (1993) talked about authentic personhood as the way we demonstrate congruence between our beliefs, ideals, and behaviors as they give meaning to the living of one’s life. “Authentic presence may be understood simply as one’s intentionally being there with another in the fullness of one’s personhood” (Boykin & Schoenhofer, 1993, p. 34). The authentic personhood of the nursing faculty members was reflected in their caring approach to those they encountered.

Being In The World

As the participants told their stories of connecting they relayed a deep sense of commitment to nursing and to the students. This commitment, their way of being-in-the-world, was the way that they existed. Their way of being-in-the-world has been shaped by their culture, history, perceptions, and experiences. The world in which one finds one’s self situated establishes the possibilities of what one can and cannot become (Heidegger, 1962). The faculty members perceived that their connecting developed from their everyday approach to life and their belief in the unique personhood of each individual. The teachers tried to bring their experiences to light as they talked about their everydayness of being-in-the-world as teachers. Everydayness has been overlooked again and again in explicating how one interacts with others because it is what is present and is

thus difficult to describe. World is not primarily the physical sphere humans inhabit, but "world is the meaningful set of relationships, practices, and language ... " (Leonard, 1989, p. 43) which exists for humans.

The faculty members frequently remarked that they knew that they interacted with students in ways their fellow educators did not. These teachers sensed that they marched to the tune of a different drummer and this was acceptable to them. They chose to continue interacting in a manner true to their beliefs. To these educators process was more important than the didactic material. Perhaps this is reflective of their desire to connect with students and why they chose to participate in this study.

Revealing of Self

Nursing faculty and nursing students often appear to live in parallel worlds on similar courses, but with little in common. However, the faculty members believed that disclosing aspects of their lives brought them closer to the students. Every being has a way-of-being which becomes partially known through disclosing. Dasein, humanness, is perceived in its being-in-the-world through its disclosedness of self (Dreyfus, 1991; Heidegger, 1962, 1982). We relate to each other as we experience the disclosedness of the other and we interact based on this revealing of self.

Nursing faculty talked about the importance of disclosing a part of self to the students. They related stories about their families, their clinical experience, and the situations that they encountered when they were students. Disclosing of part of self helped the faculty members appear more vulnerable and human and allowed the students

to perceive part of the authenticity of the teacher. In disclosing part of self the faculty members lent the students a part of their life to make the situation both more accessible and more learnable (Greene, 1990). These educators choose to enter the world of the student rather than by exclusive existing within their own world.

Into Their World

The educators in this research study talked about living and teaching in the real world by acknowledging the multifaceted roles of both teachers and students. These nursing educators realized that a holistic view of the student was necessary if they were to join the student's world with the world of nursing. By relating learning to the lived experiences of the students, educators helped the students make connections with the world they will encounter as nurses. The nursing classroom is moving out of the traditional settings into the world of the client and it is only by relating learning to life that faculty can prepare the nurses for the world of tomorrow (Moccia, 1990b). As faculty move into the world of the student, and the student gains knowledge of the teacher, each moves toward a richer and fuller understanding and knowledge of themselves.

Being Available

Faculty identified that gaining knowledge of the student came through making themselves available to the students. Ross (1989) points out that personal assistance provided by a teacher is viewed by students as one of the most positive forms of interaction. Spending time with and being available to students was beneficial to both the

faculty member and the student. Blase (1986) indicates that it is through personal interactions with students that teachers are humanized and students become real. Students value the time spent with teachers they have connected with and seek out these teachers. Teachers who spent time outside of the classroom, are available when they are expected to be, care about the student socially and academically, and created a safe warm atmosphere were designated as caring by students (Bunting, 1984; Miller, Haber, & Byrne, 1990; Ross, 1989). These same behaviors were identified by the faculty members as some of the things that fostered connecting with students.

Faculty-student interactions which are mutually pleasing provide a sense of affirmation for both of the participants which leads to an increased sense of trust and respect. Through positive teacher-student interactions both the teacher and the student can experience increased feelings of self-worth and self-esteem (Chally, 1992; Copp, 1992; Hughes, 1992). Process is based in relationship and flows to students (Miller, Haber, & Byrne, 1990; Moccia, 1990b). The perception of being cared for is that of the recipient. The teachers may feel that they are demonstrating caring behaviors, but unless the student perceives them as such, they are not caring (Hughes, 1992). The faculty members described interactions where they thought they were interacting in a caring manner, only to discover later that their behavior had not been considered as caring.

Caring can take many forms. Faculty members told stories about using humor to portray a caring attitude toward students. They also used humor to diffuse a tense situation.

Using Humor

The use of humor was one of the ways that faculty tried to be-with students. Faculty often promoted a sense of self-worth by fostering friendly interactions which made both teacher and student feel more comfortable (Blase, 1986). When faculty and students are laughing together they are communicating with each other. Blase (1986) reported that teachers had more fun when students were viewed as people. The perception of the personhood of students often lead to more laughing, joking, sharing, appreciation and mutual trust. Cohen (1993) stated that “student-teacher interactions comprise the heart of education” (p. 624).

Humor can bridge the gaps between the world of the teacher and the world of the student. Students listed openness and humor as two of the most essential characteristics of good teachers (Hedin, 1992). Moccia (1990b) urges the building of educational communities based on the interrelationships that facilitate learning, responsibility, accountability, and a sense of community. This can only occur when there is free flowing dialogue between faculty and students (Moccia 1990b; Murray, 1989; Diekelmann, 1990).

Types of Connections: Intellectual and Emotive

Intellectual Connecting

Meaningful dialogue may first appear when dealing with content rather than emotive issues. The participants of this study expressed a sense of joy and purpose when

they became aware that a student had achieved an intellectual connection. Often when intellectual connections occurred, the teacher moved from the provider of information to the facilitator of learning. As a facilitator of learning faculty members helped students to find meaning in an experience, examine perceptions, and explore new horizons (Diekelmann, 1989; Murray, 1989).

How can educators help to facilitate intellectual growth? Diekelmann (1988, 1989, 1993a, 1993c) would answer that teachers need to live in the world learningly. Heidegger (1971) stated that “to learn means: to become knowing. In Latin, knowing is qui vidit, one who has seen, has caught sight of something, and who never again loses sight of what he has caught sight of. To learn means: to attain to such seeing. To this belongs our reaching it; namely on the way, on a journey. To put oneself on a journey, to experience, means to learn” (p. 143).

To live learningly as a nurse educator means to be always open to new possibilities, for one’s self and for the students. To live out who we are and what we hold dear through a consistency between our beliefs and our actions. To share with students our belief in them and what they can accomplish and to show them a world full of possibilities (Boykin & Schoenhofer, 1993; de Tornyay, 1990; Diekelmann, 1989, 1990). To live learningly is a journey that includes the knowledge of self, the developing of a sensitivity to others and their needs, a commitment to students, the recognition of the accomplishments of others, and a rejoicing in learning (Bunting, 1984; Copp, 1992 ; Hedin, 1992; Moccia, 1988).

Emotive Being Alongside

As teachers learn more about their students they become less judgmental, less critical, more accepting, and can more easily facilitate learning (Blase, 1986; Bunting, 1984). The stories of the nurse educators were rich with illustrations of how knowing and caring about students made a difference to the student. Often the knowing of students centered on the communication of similar values and respect for the personhood of all individuals and this knowledge came through knowing. Sometimes knowing the student came through helping the student through a crisis or gaining knowledge about their family.

Caring interactions help those involved to develop a more accurate pictures of themselves and the other. Miller (1986) spoke of the development of self-worth through the attention to and recognition of our experiences. Our interactions with others contribute either to feelings of being diminished or to feelings associated with self-worth and growth (Miller, 1986). Nursing educators play an enormously important role in socializing future generations of nurses. To socialize students in a positive way, teachers need then to interact with them in such a manner that they feel valued. Viewing individuals in a holistic manner is a key to caring. Caring interactions have an important place in the lives of students, teachers, and nurses (Boykin & Schoenhofer, 1993; Diekelmann, 1990; Miller, 1986; Tanner, 1990b).

Blase (1986) provided an interesting thought for educators by maintaining that students are the most powerful socializing agent for teachers. Teachers are aware that

part of their professional responsibilities is the socialization of student, but they do not often see themselves as being “humanized” through their interactions with students (Blase, 1986). Interactions never leave those involved unchanged. Interactions either enhance or diminish those involved. The humanization of teachers is often achieved through interactions with students who have demanded authenticity. An example of this would be when students try to achieve fair and/or equal treatment or respect from the teacher.

Shared Values

Students can help faculty behave in an authentic manner by helping faculty become aware of times when their actions are not consistent with their stated values. The faculty members in this study attempted to teach students about the way they perceived nursing could be through discussing their values and beliefs. The educators strove to find a common ground where relationships could be fostered through comparable language, values, and practices. Heidegger (1962, 1972, 1975) talks about our being-in-the-world, and Plager (1994) states that this being-in-the-world is a shared public world where we interact with others. It is in the realm of the shared public world that faculty members reside. Faculty, through their interactions with students, portray the normative values of the profession (Hughes, 1992). Nursing educators can create shared meanings of the nursing perspective during interpersonal interactions which teach that which is uniquely human: values, meaning, intuition, creativity, morality, judgement, and spiritual sensitivity (Bevis & Watson, 1989; Boyd, 1988; Broome, 1991).

As nursing faculty, the participants recognized a responsibility for the socialization of students as they become nurses and in doing so they ought to reflect "... a belief that we, as individuals, are accountable for our actions to ourselves and our communities ..." (Moccia, 1990b, p. 309). Shared values were often identified through their modeling. The student might observe the teacher modeling caring and interest, and the faculty member might observe the student caring for a fellow student or a patient. Caring was often viewed as a reaching out to another.

Reaching Out

When faculty members had the opportunity to interact with students in an unhurried manner they felt they became more sensitive to the student's feelings. Miller (1986) stated that "response/ability" is "... the idea that we each have the responsibility to recognize and attend to the experience of others, to participate in ongoing mutual empathy. People must do this for each other. Since it is a basic human need, each of us is responsible for carrying it out" (p. 14). Faculty members spoke of sensing student fear and trying to relieve it. The faculty members tried to relieve fear, first by identifying the emotion in the student and then by helping the students develop ways of feeling most competent.

Connecting with students also involved reaching out to them, whether it meant moving deadlines, going out to see a student in a public area of the campus, giving a compliment, sending a card, or giving a hug. These behaviors were reflective of the desire to model caring to the students. Faculty can not know the needs of the students

unless they know the students. A trust needs to be developed before the student will disclose part of self. A mutual sense of trust and respect are essential to knowing and connecting (Beck, 1991). The participants spoke of times when they had sought out students to provide acknowledgment of their personhood, i.e. somebody cares, or to provide encouragement.

Valuing of the personhood of individuals began with trying to accept and understand the individual for who they were and what they hoped to become. The nursing educators recognized the importance of viewing life as a whole, with the development of lasting values which related learning to the lived experiences of the students (Boykin & Schoenhofer, 1993; Diekelmann, 1990). The participants tried to help students evaluate their values and beliefs as individuals. They sought to help students become aware of people as individuals and to conduct their practice based on the uniqueness of the person. Since nursing educators believed that they lived their lives in such a manner, and thus were role models for the students, it was difficult for them when they were unable to bridge the gap between themselves and students.

Unfulfilled Efforts to Connect

Being unable to connect or feeling disconnected brought distance into the interactions between the student and faculty member. The students were often the ones who turned away from the approach of the teacher. Turning away, physically or emotionally, leads the other person to feel somehow diminished. Turning away is often a

form of being unwilling to personally engage in a situation (Miller, 1986). The educators stated that students who did not feel a connection did not approach them for help or support. Often these student went out of their way to avoid interactions with the teacher. The students might turn away in the corridor or leave an area if the faculty member approached them. Faculty members tried many ways to connect with students before they decided that connecting would not be possible with a student.

Differing Values

Faculty members described values as one of the most common ingredients which fostered connecting and conversely that which most hindered the establishment of a connection. Values referred to both moral and ethical issues, and also to the worth of the personhood of the individual. The most common discrepancy in values was reflected in the way students view patients (Appleton, 1990; Beck, 1991). The faculty members recounted stories about times when students had judged as patient when their illness was the result of behaviors that might be considered anti-social. An example was given of a student who didn't want to spend time caring for a man who was hospitalized with problems associated with alcoholism. The faculty attempted to model behaviors and interactions that were reflective of their value systems which included valuing the personhood of each individual. Cooper (1982) and Hughes (1992) have identified modeling as an essential part of the socialization process for nursing students.

Members of the nursing faculties preferred connectedness over unconnectedness. They don't have students, every semester, that they feel unconnected from nor do they

have students every semester with whom they feel a deep connection. Much of their time teaching is spent in the average world of give and take between student and teacher. Caring and connecting are important to the nurse educators and the language used throughout their stories paints rich pictures of their experiences.

Nursing faculty were very conscious that their approach to students could deter connecting or facilitate connecting. Faculty members often felt pulled in many directions which impacted their ability to be with students and form connections (Clayton & Murray, 1989). Being with students involves a willingness to be and a commitment of time and energy.

The Cost and Language of Connecting

The Cost

Bevis (1989e) states that one of the teacher's roles is to nurture students, but a teacher must have the desire to nurture students. The desire to connect is often reflective of one's commitment to the students and the emotional availability of the teacher (Boykin & Schoenhofer, 1993; Hedin, 1992). The faculty members in this study described the desire to connect with students as a component of their caring. They believed that one must desire to connect with students, before a connection can form. However, faculty described the availability of time as an equal ingredient in their ability to form connections.

Beck (1991) and Nelms, Jones, & Gray (1993) are among those who identify spending time with students as a behavior that students perceive as caring. However, faculty members have commitments which draw them away from teacher-student interactions and impinge on the time they have available for students. These demands include both departmental and school-wide responsibilities, as well as personal demands such as family and education.

The interpretation of the faculty members' stories and this inquiry have only been possible because of language. Language is that which is necessary to illumine the world and elucidate that which exists in everydayness (Leonard, 1989; LeMay & Pitts, 1994).

The Language of Connecting

It is through language that nursing faculty communicate the phenomenon of their everyday, lived experiences of connecting with students. Heidegger (1971, 1975) uses the words Discourse, Saying, and Showing instead of Language, so that one will not be drawn into the common understanding of language. Language is that which encircles, maintains, proffers, and holds humans in a relation to the world. It is described as "the relations of all relations" (Heidegger, 1971, p. 107).

I found the language used by the nurse educators fascinating. Their language was resplendent with words connoting energy. Miller (1986) suggested that energy or "zest" is an indicator that a connection exists. She said that zest is "... the emotion -- the feeling- - which comes when we feel a real sense of connection with another person(s). It is an increase -- as opposed to a decrease -- in a feeling of vitality, aliveness, energy.... it is

when people make emotional connection and it is noticeably absent when we do not.

(Miller, 1986, p. 7)

The Interrelatedness of Caring and Connecting

"Language represents a practical knowledge of people living and working in a social setting. It is the use of language which contributes a substantial reality ... " (Clark, 1992, p. 249). The participants talked in a hermeneutic circle when trying to discuss the relationship between caring and connecting. In this case an example of talking in a hermeneutic circle would be that they used the concept of caring to explain connecting, only to describe connecting in terms of caring. In the end most faculty agreed that caring was essential if connecting was going to occur.

Bevis (1989c) called caring the "moral imperative of nursing" (p. 79), while Boykin & Schoenhofer (1993) stated that "Being person means living caring..." (p. 3). Caring is the percussor of connecting and connecting is living caringly.

The Concept of Connection

The opinions that I have formed from interacting with the stories provided by nursing faculty is that connecting with students is difficult if one does not have the desire to connect, the time to foster connections, and the energy to work on establishing and maintaining the relationship. Connecting with students is a process which can develop over time or it might be formed as the result of one significant interaction. I also believe

that connectedness is a concept that is based on one's beliefs about the worth and uniqueness of and individual. Teacher-student connections increase as the relationship becomes grounded in a deeper sense of knowing. As the depth of knowledge increases the interactions become more personal, more animated, and more enjoyable. Connecting is an increase in the intensity and depth of caring that may be perceived unilaterally, or mutually experienced by the teacher and the student.

Summary

This chapter has provided a discussion of the findings using both literature and concepts of Heideggerian hermeneutical phenomenology. The personal beliefs of nursing faculty regarding their perception of their everyday way of being and their comportment as humans, nurses and educators have been discussed. Faculty believed that they interacted with all people in a caring fashion and that their relationship with students was founded in their regard for the personhood of individuals.

Faculty beliefs about their way of being-with students was discussed in light of the way faculty members believed that they connected with students. The faculty sought to connect with students personally and intellectually. Faculty also discussed their desire to interact with students as they were being socialized into the world of nursing. The faculty members spoke of the time and energy required to connect.

The faculty discussed trying to connect with students and being unable to accomplish their goal. They described some degree of turning away or not approaching,

as one of the hallmarks of being unable to connect with students. Personality, perceptions and values were all part of the phenomenon of unconnectedness. The faculty members often tried various strategies to reach students, but realized that connecting with some students was impossible.

Connecting did not occur without the expenditure of time and self. Faculty members needed both the time and the energy to connect. Often they desired a connection, but lacked the time or the energy to pursue one.

Finally, the faculty provided a discussion regarding the interrelatedness of caring and connecting. Caring was described as a forerunner of connecting and a vital component of connecting. Connecting with students was perceived as rewarding and fulfilling and something they would continue to pursue.

CHAPTER SIX

IMPLICATIONS

In Chapter Six, the implications of this study will be addressed. The strengths of this study will comprise the first portion of this discussion. The middle portion of this chapter will delineate the limitations of this particular study. The final section of this chapter will introduce areas ripe for further research by nurse educators and the implications of the study for nursing education.

The Strengths of This Study

One of the strengths of this study was the methodology used. Heideggerian hermeneutical phenomenology seeks to bring to light that which is obscured by its everydayness. Watson (1989) states that a phenomenological approach to studying the practices of nurse educators allows the educators an opportunity to reflect on their humanity and set forth their experiences in a manner that others might recognize. However, in providing the opportunity for others to view the world of the educators who participated in this study, I was not free to interpret their stories as I desired. It was necessary for me to offer a true representation of the lived stories of the nurse educators. In order to ensure the accuracy of the stories it was necessary to attend to the principles

of rigor. Rigor in hermeneutical phenomenology primarily deals with methodological issues such as credibility, intelligibility, auditability, and ethical conduct (Morse, 1991b; Sandelowski, 1986; Van Manen, 1990).

The Participants - Credibility

One of the strengths of this research study was the expertise of the nursing faculty who chose to share their stories. Most of the faculty members had been teaching at least 10 years, with two teaching less than 10 years and two teaching more than 20 years. The average amount of time spent educating nurses was 14.6 years. They had also taught a variety of nursing subjects. The nurse educators had taught in all types of nursing programs which ranged from nursing assistant programs through graduate programs. They had experienced connecting with students in both the clinical setting and in the classroom.

Morse (1991a) listed three characteristics of good informants. Morse stated that they must: (a) be willing to critically examine their experience; (b) be willing to share the experience; and (c) be willing to answer the interviewer's questions. By virtue of their experience the participants were the experts in the area of connecting and were willing to share their experiences. They were also able to articulate their experiences in such a manner as to represent their lives as they interacted with students with clarity. They also had the desire to provide the clearest picture possible by answering the interviewer's questions.

Intelligibility-Trustworthiness

Heidegger (1959) states that phenomena can be perceived from a limited number of viewpoints which reflect the lived experience of the participant. Intelligibility and credibility are used to present the phenomenon in a manner that is rational and believable. If this is accomplished then the reader can grasp the essentialness of what is being presented. They can perceive what the essence of the phenomena is as it presents itself to them.

Intelligibility for a hermeneutical study is judged by two questions. The first question is: Can the experience, as described by the researcher, be recognized by the participants of the study as a representation of their experience (Diekelmann, 1993b)? Perhaps the truest test of trustworthiness is the response received from the participants when presented with the analysis and narrative of the study. Does the researcher receive the phenomenological nod which is indicative of the participant's agreement that the essence of the phenomenon has been captured (Allen & Jensen, 1990; Brink, 1991; Munhall, 1994b; Sandelowski, 1986)? Selected participants were asked to assess the trueness of the interpretation based on their personal experiences. The participants of the study responded to the story provided in Chapter Four with resounding approval of the accuracy of their stories. I felt that I received the “phenomenological nod” and thus provided a true representation of the concept of connecting to the readers of this study.

The second question asks if it is possible for the reader of the completed study to develop the same interpretation based on the text of the study (Allen & Jensen, 1990).

Hermeneutical phenomenological studies must provide both an explanation and an understanding of the phenomenon of interest. The discussion of the study must be presented in such a manner that the stories, when woven together, make sense. The investigator seeks to articulate their findings in a manner that portrays the stories of the participants (Munhall, 1994).

Auditability

The auditability of the researcher's thoughts and decisions is a component of rigor (Morse, 1991a; Munhall, 1994b). Auditability refers to the reader's ability to follow the decision paths of the researcher. In hermeneutical phenomenology one strives to show that their interpretation of the stories of the participants is the most logical interpretation. Auditability helps the reader to understand why certain decisions were made and why particular portions of the dialogue were chosen for inclusion. Auditability is also important because there can be no exact replication of this study. The best that a researcher can hope for is that a future study would result in similar themes (Brink, 1991; Diekelmann, 1993b; Sandelowski, 1986; Webb, 1992). Appendix F provides some insight into my initial coding of the themes, the correlation of the initial themes with the final constitutive themes, and a link between the constitutive themes and their identification with Heideggerian concepts. I believe that the discussion found in Chapters Four and Five will be beneficial in the reader's attempts to follow my thought process. I believe that the interpretation I provided is true to the stories of the nursing faculty.

Ethical Conduct

This study was conducted in such a manner as to comply with the expectation of ethical conduct. Ethical conduct begins with obtaining informed consent, providing the freedom to withdraw from the study, and disclosing the inherent risks to the participant. The members of the nursing faculty were able to review the purpose of this research prior to contacting me. Once they choose to participate in the study they were asked to sign a consent form after I had answered their questions. The participants were reassured that they were free to withdraw from the study at any time.

Confidentiality and anonymity of the participants were maintained in the collection of data, the evolution of data into constitutive patterns, and in the presentation of data. All audio-tapes were given a number prior to transcription to protect the participant's identity. Once the stories of the faculty members were obtained, via audio-taping, the tapes were maintained in a locked file cabinet. I was the only one who had access to the file cabinet. Those selected individuals who helped with the identification of themes had only numbered transcripts to work from as the source of data. The tapes will be destroyed at the completion of this research.

Limitations of This Research Study

Amount of Data

Heideggerian hermeneutical phenomenological research, like other forms of phenomenology, is hindered by the volume of data obtained from the stories of the

participants. To face the reality of the amount of data obtained, the number of participants is often limited. The transcription of each interview averaged 20 pages. I did my own transcription and I felt that having more the 10 participants in the study would have been overwhelming.

There is also a basic assumption in phenomenological research that the participants' stories will contain ingredients that would be common to anyone experiencing the same phenomenon (Dukes, 1984; Sandelowski, 1986). I believe that although the experiences of each of the nurse educators are unique, they do allow for some degree of typification which are amenable to theoretical analysis. The world in which we live may have novelties, but it is never absolutely novel or we would not recognize anything or anyone (F. Kersten, personal communication, November 27, 1994). Based on both the length of each interview and the assumption of commonality of descriptions, I chose to limit the number of participants to ten.

Researcher Bias

As a researcher, one enters a particular arena because of a prior interest in the phenomenon. The investigator is asked to acknowledge, or bracket, their assumptions prior to the start of phenomenological research in order to offset a slanted interpretation of the data. My assumptions were that all nursing faculty members had experienced a time when they had connected with a student; connecting was a multifaceted phenomenon and it went beyond the typical faculty-student relationships; a nursing faculty member might care (have concern) for students, but not connect with students;

and a faculty member who connected with students also exhibited caring behaviors toward students. The last assumption was that connecting had a positive influence on the student, faculty member, or both. The fact that I worked under the supervision of my dissertation committee, who reviewed all steps of the study, offset any threats that I might allow my biases or assumptions to dictate the interpretation of the participants' stories.

The examination of the researcher's interpretation by the participants in the study was the final check I used to guard against bias. Munhall (1994b) stated that "the participants are the only ones who can answer the question whether you have captured their telling of the experience and the meaning the experience held for them" (p. 189). The interpretation found in Chapter Four was returned to two of the participants in the study who responded positively to the interpretation. The receiving of their "phenomenological nod" was essential to me to support the validity of the study.

Research Team

Although this study was thoroughly guided by my dissertation committee, for future research endeavors I would like to establish a research group to assist with the identification of constitutive themes. As the number of qualitative researchers increase it would be exciting to establish a group of qualitative researchers that would be composed of interested people from all of the institutions of higher education in San Diego. I believe that such a group would be able to support its members by offering to help one another with research studies. It would be hoped that those who chose to be members

could provide a nucleus of interested parties to work together on data interpretation. This supportive research team would be consistent with the process outlined by Diekelmann & Allen (1989) which I adapted for the research study.

The Gender of The Population

The nurse educators for this study were all female. This was not by design, but was reflective of the fact that the majority of those who volunteered to be interviewed were females. I had one response from a male nurse educator, but we were unable to find a time when we could meet for the interview.

The Implications of This Study

The stories provided by nursing faculty about the times they were able to connect with students and times when they were unsuccessful in their attempts to connect provided a wealth of information. I believe that the more we learn about student-teacher interactions the better we can educate the future leaders in the nursing profession.

Nursing Education

Caring has been identified by many authors as the heart of nursing education (Bevis, 1989c; Boykin & Schoenhofer, 1993; Cohen, 1993; Diekelmann, 1993a). Dreyfus (1991) stated that the ideas, practices, discrimination, and everyday skill that provide the socialization into shared practices allow us to better understand ourselves. It is important for those of us who have practiced in the domain of nursing education for some time to re-examine our practices. Do we practice nursing education in a caring,

nurturing manner that will, on some level, facilitate faculty-student connections? As we read the stories of those who participated in this study, do we see our selves or do we come to the realization that we are no longer modeling caring or seeking to connect with students?

Nursing care cannot be rendered impartially but consists of an interconnectedness that derives from the oneness of humankind. Cohen (1993) accentuated the importance of a holistic, interconnected relationship that must be part of nursing education. There have always been and will always be nursing educators who are caring and who may or may not connect with students. However, I believe that as we educate the future nursing educators we help them value the importance of caring and connecting with students. These future educators need to be the recipients of caring and connected interactions. The faculty members who participated in this study repeatedly expressed the idea that the way they interacted with students was based on the value of the uniqueness of each person. As those who are student teachers experience the valuing of their personhood, they become more apt to value the personhood of their students and respond in a caring manner.

As nursing begins to break free from the rigid nursing curricula of the past, we, as educators, must learn from our history and build a curricula that centers on the student-teacher relationship. The description of connecting provided by these nursing educators needs to be brought into the curricula that fashions the educators of the future. As new nurse educator are learning their craft it is important for them to know that there are many styles of teaching and many approaches to teaching. New educators may need

permission to teach in a manner that is comfortable for them. It is important that as new educators do the course work to prepare them for the role of nurse educator that they be allowed to try various styles of teaching and have exposure to role models. Those who teach the future educators can model the importance of connecting, as well as caring, as a part of the education process. An example of a behavior that would foster connecting would include changing the deadline of a paper to reduce student stress. Another example might be making a concerted effort to get to know a student who might be from a different background or culture. Obtaining knowledge about the student could help the teacher understand why the student might be having difficulty with written or oral assignments.

It will always be impractical to believe that there is only one way to interact with students, but these stories might give others the freedom to try new things. The care received from educators is the very thing that should be carried over into practice.

The care and values that nurse educators demonstrate in their practice is often reflective of the way caring and connecting were modeled for them as students. As nursing educators share their stories it is important to identify important events, and make sense of the world in which we exist. Story telling often helps the novice to experience the world of the expert. The stories of the participants revealed many aspects about the world of teaching. However, it also revealed areas that were in need of further study.

Nursing Research

Astin (1993) reports that the gender of those interacting in a specific situation is a key component of those factors which can influence the outcome for students in higher education. The issue of gender and its effect are crucial when “the particular environmental experiences affects men differently from women” (Astin, 1993, p. xvii). Men and women have differing conversational styles that can lead to misinterpretation and misunderstanding. It is therefore conceivable that the desire or ability to connect might reflect the differences in communication patterns (Tannen, 1986). This study of connecting needs to be expanded to include all of the dyad possibilities of student-teacher genders and their styles of interacting.

Another area that should be studied, is the dyad relationships related to student-teacher from various cultures and ethnic backgrounds. How does one’s culture impact the concept of connecting and one’s ability to connect?

One of the most interesting aspects of this study has been the verbalization that, as teachers, they were often unaware that a connection was occurring. This is an intriguing observation. What was it that the student sensed, that the faculty member did not? It leads to the thought that connecting can be a unilateral experience. Research is needed to study students’ experiences regarding connecting with a teacher. By studying connecting from both the perspective of the student and the faculty member a clearer picture of the phenomenon can be obtained.

Blase (1986) detailed the change in the interactional process that occurs from the time the teacher assumes their first teaching position until they retire. The level of involvement changes from trying to be friends with the students, to emotional distancing, and then back to a more middle-of-the-road position. The participants of this study had been teaching for between seven to thirty years. An expanded picture of connecting could be obtained from studying cohort groups of nursing faculty with one year of experience, three years of experience, five years of teaching, 10 years of practice, and 15 years as a nursing educator.

It might be presumed that the nurse educator with the least amount of teaching experience would also be younger than a teacher who had been teaching 10 or 15 years. However, many nurse educators enter the teaching profession later in their career. Would the types of interactions they engage in as new educators be offset by their clinical experiences?

Age must also be considered from the perspective of the student. Many programs no longer cater to that student newly graduated from high school. Students in nursing programs include both the generic student and those pursuing a second career. Raven & Jimmerson (1992) concluded from their research that “adults are more likely to be more diverse, better students and more competent than traditional students but also might be more demanding and pose more questions and challenge to instructors” (p. 139). How would connecting be revealed by the older student?

The questions raised in the above paragraphs are areas that I have identified to be in need of further research. I believe that the more we learn about student-teacher interactions the better we can educate the future leaders in the nursing profession. Packer (1989) reminds us that the past is known and can provide insight into the future. The future can never be known, but by studying the past we might anticipate the possibilities of the future. The educators of today, who can visualize the possibilities for the future are in a position to influence the history yet to come where caring and connecting are the norm, rather than that which is sought after.

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Appendix A

DESCRIPTIVE VIGNETTES OF THE PARTICIPANTS

Appendix A

DESCRIPTIVE VIGNETTES OF THE PARTICIPANTS

Nursing faculty member “A” had been teaching for seven years in an A.D.N. program. She had not taught in any other type of nursing program. She had received her master’s degree in nursing. She had taught maternal/child nursing, nursing of children and adolescents, health assessment, and medical/surgical nursing.

Nursing faculty member “B” had been a member of the teaching profession for almost 30 years. She started her educational process in a baccalaureate program, obtained master’s degrees in counseling and medical/surgical nursing, and had achieved a Ph.D. in sociology. In her career she had taught fundamentals of nursing, rehabilitation nursing, psychiatric nursing, and leadership/management. She had experience in teaching in hospital programs, A.D.N. programs, B.S.N. and graduate programs.

The third faculty member, “C”, had experience teaching in formal academic settings and in arenas common to nursing, which included hospital settings and community based situations. Faculty member “C” had begun her educational process in a diploma program. She has earned a B.S.N., a master of arts degrees in education, and a Ph.D. in nursing. Her teaching assignments have included psychiatric nursing, management and leadership, client-nurse relationship courses, communication, and professional development. She has been teaching 11 years.

The fourth nursing faculty, “D”, to volunteer had completed both her B.S.N. and M.S.N. degrees. She has been teaching for 15 years and has taught in vocational nursing

programs and A.D.N. programs. She has taught geriatrics, community health, psychiatric nursing, medical/surgical nursing, health assessment, and leadership and management.

Faculty member, “E”, had taught in A.D.N. and B.S.N. programs. Most of her teaching assignments had centered of pediatrics, although she had taught some maternity nursing. She has taught for over 12 years. Her highest degree was a Ph.D. in nursing. She also had earned a B.S.N. and a M.S.N. degree after her initial education in an A.D.N. program.

Participant “F” has taught nursing for somewhere between 20 to 25 years. She taught nurse’s aids, in an inservice setting, nursing fundamentals, medical/surgical nursing, peri-operative nursing, L.V.N.s (licensed vocational nurses), and maternity nursing. The material she has taught is reflective of the types of nursing programs she has taught in. These have included programs for nurse’s aids, L.V.N.s, A.D.N. programs, and in diploma programs.

The seventh nursing faculty member, “G”, had completed her B.S.N. and M.S.N. programs and was a D.N.Sc. (Doctor of Nursing Science) candidate. She has taught exclusively in B.S.N. programs. She has been teaching for fourteen years. Her areas of emphasis in teaching has been nursing fundamentals, medical/surgical nursing, and leadership.

Nursing faculty “H” began her education in an A.D.N. program and has progressed through both B.S.N. and M.S.N. programs. She has been teaching for 9 years, with experience in both L.V.N. and B.S.N. programs. She has taught adult

medical/surgical and critical care nursing, as well as leadership.

Participant faculty member “I” has split her teaching experience between acting as a preceptor for nursing students in a hospital setting and teaching in a B.S.N. programs. Her teaching experience covers a span of ten years. She has completed her B.S.N. program and is currently working on completing her M.S.N. degree. Her critical care experience has centered part of her teaching assignment around advanced medical/surgical and critical care issues. She has also taught nursing fundamentals.

The last, but by no means least participant, faculty member “J”, has been teaching for 14 years. Her educational process started in an A.D.N. program and has progressed through both a B.S.N. and M.S.N. program, and culminates with an Ed.D. (Doctor of Education) degree. She has taught nursing fundamental, medical/surgical nursing, leadership and management, home health, and role transition. She has taught in L.V.N. and A.D.N. programs as well as B.S.N. and M.S.N. programs.

Appendix C

LETTER OF INFORMATION

Appendix C

LETTER OF INFORMATION

I am seeking information on how nursing faculty connect with students. What is it, in the everyday practice of the nursing educator, that fosters growth in students? How do nurse educators assist students to flourish, and learn, and develop? What is the nursing faculty's description of the everyday experience of connecting with their students? I would like to interview nursing faculty to discover their perceptions of connecting. If you would like to participate in this study to help bringing to light the experiences and stories of times when you felt that you had connected with your students I would like to talk with you. I am not seeking the extraordinary experience, but stories about the little things you do that make a difference. Your experiences will be utilized to illumine the art of teaching, so that future nursing educators will be able to encourage students and foster their development.

If you are interested in participating in this study please obtain a participant packet which has been sent to the Dean or Chair of your program. The packet will contain a consent form, a request for your name, telephone numbers, and the best time to contact you, and a self-addressed stamped envelope. You will be asked to return the sheet asking for your name and telephone number in the supplied envelop. The interview will take place at a time and location of your choice. The interview would take about one hour, but no more that 90 minutes. Due to the volume of data obtained in this type of qualitative study, I will only be able to interview a limited number of participants. I hope that you will choose to be one the faculty members to be interviewed.

Should you choose to participate in this study I will collect the signed informed consent form at the time of the interview. This will allow you to ask any questions regarding this research project. This research will pose no risk to you and you will be free to withdraw at any time. If you wish to contact me, you may call either my office at Point Loma Nazarene College (619) 221-2422, or my home (619) 287-5678.

Thank you for your time and consideration,

Debra I. Craig, M.S.N., R.N.
Doctoral Candidate
University of San Diego
Philip Y. Hahn School of Nursing

Appendix D
CONSENT FORM

Appendix D

CONSENT FORM

I volunteer to participate in the study entitled "The Lived Experience Of Nursing Faculty Connecting With Students" which seeks to describe what I, as a teacher, perceive to be everyday practices that facilitate my connecting with students.

I understand that the data will be collected during an audio-taped interview which will take place at the time and setting of my choice and that the interview will last 60 to 90 minutes. I understand that a transcription will be made of the interview by the researcher. All information, including quotes, will be reported in a manner that protects the anonymity of the participant in the publication of the results of the study. The original tape recording will be kept under lock and key and destroyed at the end of the study. All information regarding my identification and place of employment will be kept confidential by the researcher.

My signature indicates that I am willing to participate in this study and that I give my permission for the researcher to contact me at a later time for the purposes of clarification and/or to ascertain the recognizability of identified concepts.

I understand that I am free to withdraw from this study at any time. I understand that I may contact the researcher at her home telephone number (619) 287-5678 or at her office number at Point Loma Nazarene College, (619) 221-2422. I have received a copy of this consent form and understand that the study poses no physical or emotional threat to my well-being.

DATE: _____ SIGNATURE: _____

PLEASE PRINT YOUR NAME: _____

Thank you,

Debra I. Craig, M.S.N., R.N.
Doctoral Candidate
University of San Diego
Philip Y. Hahn School of Nursing

Appendix E

INTERVIEW QUESTIONS

Appendix E

INTERVIEW QUESTIONS

1. I would like you to tell me stories about the times that you have connected with a student. Not the spectacular stories, but stories about what you do in your everyday teaching that helps you to connect with a student.

2. What is it like when you connect with a student?

3. Do you know or what does it feel like when you connect with a student?

4. Can you think of components or ingredients of your interactions that facilitate your connecting with a student?

5. How do the interactions between you and the student change when you connect with a student?

6. How do you know when you don't connect with a student?

7. What things seem to interfere with connecting with a student?

8. Do you always know when you connect with a student?

9. Would you articulate what it is like to connect with a class?

10. Is caring part of connecting, or is connecting part of caring?

11. If you could describe connecting with a metaphor (word picture) what would it be?

12. Is there anything else you would like to tell me about connecting?

Appendix F
CODING SCHEME

Appendix F

CODING SCHEME

The Identification and Development of Constitutive Themes*

Initial Themes	Constitutive Themes	Heideggerian Concepts
I. Core beliefs & attitudes of teachers	I. Teachers as they see themselves	I. The Dasein (humanness) of the teachers
A. Philosophy of teaching	A. Philosophy of life	A. Personal way of Being
1. Describes a teacher's basic approach to teaching	1. Their way of being	1. Ways of Being
2. Doing things other teacher's don't desire to do	2. Being themselves	2. Being-In-The-World
B. Personal way of acting/ comportment	B. Teacher comportment	B. Dasein's comportment
1. Acknowledging the real world the world of nursing. Acknowledging the real world of student commitments	1. Into the world	1. Dasein's everydayness
2. Revealing one's self as human. Teachers feel free to reveal part of self.	2. Revealing of self	2. Dasein's disclosing
C. The teachers reach out to students.	C. Reaching out to students	C. Being-With
1. A definite effort is made to connect	1. Into their world	1. Dasein as Being-With
2. Making one's self available	2. Being available	2. Being-With Students
3. Humor increases the approachability of teachers. Humor facilitates learning.	3. Using humor	

The Identification and Development of Constitutive Themes (Continued)

Initial Themes	Constitutive Themes	Heideggerian Concepts
II. Two types of connecting exist.	II. Types of connecting: intellectual & emotive	Being-With: intellectual & emotive
A. Intellectual connecting	A. Intellectual connecting	A. Intellectual Being-with
1. Reciprocity of interactions increases	1. Student demeanor	1. Student's Dasein
2. The classroom atmosphere changes after a connection. Energy & excitement felt after a connection. Activity in a classroom increases after connecting.	2. The interactivity of connecting	2. Daseins interacting together
B. Personal connecting with students	B. Emotive connecting	B. Emotive Being-with
1. There is an increased depth of knowing. Identifying fear & anxiety in students.	1. Being alongside	1. Being alongside
2. Students' love of learning help connecting. Students valuing people help teachers connect.	2. Shared values	2. Sharing of values with-in-the-world
3. Knowing the student helps connecting. The teachers reach out to students.	3. Reaching out	3. Knowing as Being-with
4. Beneficial give & take Personal connections change interactions.	4. The openness of connecting	4. Living together learningly

The Identification and Development of Constitutive Themes (Continued)

Initial Themes	Constitutive Themes	Heideggerian Concepts
III. Not connected: unconnected	III. Unfulfilled efforts to connect	III. Not Being-with: unconnected
A. Signs of not connecting. Not connecting frustrates teachers.	A. The emotive demeanor of students.	A. Turning away/not approaching
B. The classroom is not interactive. Signs of not connecting. Students hide when there is no connection.	B. The intellectual demeanor of students.	B. Not approaching
C. Students bring the past into the present. Expectations of others may hinder connecting.	C. Preconceptions influence connecting	C. Preconceptions about the Dasein's of others
D. Hindrances to connecting: values, beliefs, & views. Culture &/or language may hinder connecting.	D. Differing values	D. Not Being-with: differing values

The Identification and Development of Constitutive Themes (Continued)

Initial Themes	Constitutive Themes	Heideggerian Concepts
IV. There is a cost to connecting.	IV. The cost of connecting	IV. The cost of connecting on the teacher's Dasein
A. Time is important to connecting. One must have time & energy to connect.	A. Time	A. Conflicting expectations of Dasein
B. There is a physical response to being unconnected.	B. Physical Effect	B. The physical effect of unconnectedness on Dasein
V. The language associated with connecting.	V. The Language of connecting	V. Language (Saying or Discourse)
A. Energy & excitement are felt with connecting which is reflected in language.	A. The energy	A. The Saying of connecting
B. Possible word pictures for connecting.	B. Word pictures of connecting	B. Disclosing the image of connecting
VI. Caring or connecting - which first?	VI. Philosophical Responses	VI. Caring & connecting as a comportment of Dasein
A. Caring must be first	A. Caring precedes connecting.	
B. Connecting is part of caring	B. The interrelatedness of caring & connecting.	

* The Heideggerian concepts were associated with the constitutive themes identified for the intellectual satisfaction of this author. For clarity of thought it was necessary to use the themes identified in Chapter 4 in the discussion of the findings in Chapter 5. If I were going to discuss Heideggerian concepts in depth in this dissertation, the richness of the findings might have been diluted as the readers sought to understand both the findings and Heideggerian language.