



UNIVERSITY OF  
GOTHENBURG

# DRAMA PEDAGOGY IN NURSING EDUCATION

– Learning about Conflict Management

Margret Lepp, Stina Larsson, Susanna Höglund Arveklef & Linda Berg

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Authors: Margret Lepp, Stina Larsson, Susanna Höglund Arveklev & Linda Berg

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## Preface

THIS REPORT DESCRIBES a drama programme that has been developed by the authors. It has been designed for use by anyone interested in understanding how drama pedagogy may be used in healthcare education to teach conflict management skills. Teaching conflict management skills requires methods that give the students an opportunity to test and reflect on conflicts that may arise in care situations in a safe learning environment together with teachers and other students. The report is intended for use as a pedagogical tool by drama teachers and nursing teachers involved in the nursing programme. It may also be of use for other healthcare education programmes. This report relates to the Swedish report No. 3, translated to English: *Drama Pedagogy in Nursing Education – Learning about Care, Encounters and Communication*, (Berg, Höglund Arveklef, Larsson & Lepp, 2019). Its content is based on research results from the international DRACON project (DRAMA and CONFLICT resolution) that has been developed and implemented in Australia, Malaysia and Sweden (O’Toole, Bagshaw, Burton, Grünbaum, Lepp, Morrison & Pillai, 2019; Grünbaum & Lepp, 2005/2013; Burton, Lepp, Morrison & O’Toole, 2015).

The report deals with how nursing education, conflict management and drama pedagogy may be integrated in order to enhance students’ learning. It presents a component of the course Leadership and Learning (OM4380, 15 ECTS credits) that uses drama to

teach conflict management skills. The course is given during the final year of the three-year nursing programme at the Institute of Health and Care Sciences, Sahlgrenska Academy, University of Gothenburg. This course component was initiated by Margret Lepp in 2008. In 2009 Stina Larsson was involved in its implementation, and since 2010 the workshop has been led by her, and the lecture about conflict management theory has been led by either of them.

The report begins with a chapter on becoming a nurse, with a focus on the issue of conflict management. The second chapter discusses conflict management, ethics and drama in education. The third describes the learning process and presents a drama programme for learning about conflict management. The two following chapters present drama teachers' reflections and students' experiences of using drama to learn about conflict management. The final chapter contains some general reflections on the use of drama pedagogy in healthcare education to assist learning about conflict management.



# Studying to become a nurse and learning about conflict management

NURSING PROGRAMMES IN Sweden consist of three years of full-time studies (180 ECTS credits) with both theoretical and clinical studies included, and leads to a bachelor degree and vocational qualification. The profession places high demands on professionalism and competence in communicating with patients, relatives, colleagues and students. Today's increasingly stressful work environment in the healthcare system exacerbates the risk of interpersonal conflicts occurring (Brinkert, 2010; Pines et al., 2012).

During semester the last year or term of the nursing programme, a section on conflict management is included in the course *Leadership and Learning* (15 ECTS credits), Gothenburg University, 2016). The course consists of four modules:

- Leadership and organization (4.5 ECTS credits).
- Interprofessional learning (3 ECTS credits).
- Quality and how to improve knowledge (3 ECTS credits).
- Learning (4.5 ECTS credits).

This report focuses on the module Leadership and organization (4.5 ECTS credits) since it includes conflict management. The module contains the following elements:

- Theories of organization, leadership and collegiality in healthcare
- Work environment
- Crisis management and disaster medicine
- Conflict
- Health economics concepts, prioritization and analyses
- Code of conduct; opportunities and obstacles to working with sustainable development.

After completing the section on conflict management, students are expected to be able to explain theories of conflict and conflict management, and to analyze conflict situations using the ABC model. They should be able to reflect on the importance of communication in conflicts and conflict management in healthcare situations involving nursing. They should also be able to specify the core elements of a nurse's conflict management competence.

# Conflict management

THE EDUCATION PLAN for the three year Nursing Programme (180 ECTS credits) is designed to enable students to develop knowledge and understanding, skills and competence, and the ability to evaluate and decide upon professional approaches (Sahlgrenska Academy's Board, 2013). Upon completion of the programme, students should be able to develop positive nursing relationships with patients, eliminate factors that may jeopardize their wellbeing, identify factors that may enhance their health and wellbeing, and help them learn. They should also be able to demonstrate knowledge about the importance of the environment in general and the healthcare environment in particular for human health and wellbeing. Today, rapid technological development, an aging population and a shortage of nurses contribute to ethical dilemmas and challenges that increase the risk of conflicts in daily nursing practice. This mean that patients may not always receive the support they need to learn or experience wellbeing and health improvement. It is therefore important that students learn how to handle situations of conflict.

## **The concept of conflict**

The concept of conflict can be defined in various ways, but in most definitions it is described as a process involving two or more pe-

ople who feel they stand in opposition to one another (Almost, 2006). Conflict may be defined as:

... a social situation in which at least two parties are striving to acquire the same set of scarce assets (Wallensteen, 1994, p. 14).

Conflicts may arise within the nursing group, between nurses and other healthcare staff, and also between nurses and patients and their relatives. If these conflicts are not resolved or if they are dealt with unsatisfactorily, they can have a negative impact on the organization, the healthcare staff and the patients (Johansen, 2012).

Analyzing a conflict requires knowing which parties are involved. These are the people who play leading roles in the conflict that is being played out. Then there are those who play secondary or supporting roles including people who witness a conflict but do not intervene. In the language of dramaturgy, these are the “extras”. The conflicting parties may have equal power, which makes the conflict symmetric, which means it is more likely that the parties will be able to resolve the conflict themselves than if the relationship is asymmetric. In an asymmetric conflict, the person in the lower position is likely to have a weaker negotiating position. This may be addressed by strengthening the weaker party’s status (Grünbaum & Lepp, 2005/2013).

## **ABC theory**

The ABC theory provides a model of the way in which conflicts may develop and be managed. Conflicts can be seen as consisting of different levels or steps. Galtung (1996) developed the ABC theory, which highlights these levels. As a conflict escalates, the

steps follow the order C-A-B and as it de-escalates, they follow the order B-A-C. The letters stand for:

- B = Behavior
- A = Attitude
- C = Contradiction and content

A conflict often arises from a particular issue (C), which is latent at level C. If the situation escalates to step A, then it becomes emotionally charged and the parties begin to see one another as opponents. Escalation may then continue to step B. One negative behavior may then lead on to another and it becomes increasingly difficult to resolve the conflict. The conflict is by now manifest. The parties may begin to act threateningly towards one another and behave in ways that consolidate their positions (CAB). Resolving the conflict requires reversing the order of the steps (BAC). If one party stops using threatening or violent behavior, attitudes begin to soften and the parties may be able to agree on a solution to the problem (Grünbaum & Lepp, 2005; Burton et al., 2015; O'Toole et al., 2019). Nowadays, the idea of transforming conflicts has gained currency. It means: "To influence the dynamics of a conflict so as to transform it into a constructive interaction. This is done by influencing attitudes, behavior and, ultimately, the dispute itself (Åkerlund, 2005, p. 193).

## **Conflict styles**

Thomas and Kilmann (1979) describe different conflict styles and how we relate to our own and others' needs. These conflict styles are described using animal metaphors, as listed below:

- Lion                      Fight
- Camel                     Adaptation
- Turtle                    Avoidance
- Fox                        Compromise
- Owl                        Collaboration

The lion symbolizes a style of conflict in which one person's needs take precedence over those of others, and this style easily becomes dominant in a dispute. The owl stands for interaction in which everyone is given a chance to speak and be heard before the parties begin to seek solutions to their disagreement. In this kind of interaction, the parties work towards a win - win situation by cooperating so that everyone involved feels satisfied (Grünbaum & Lepp, 2005/2013). It is important to familiarize oneself with all of these conflict styles and relate them to particular situations. If one or more people intervene in a conflict without being the main actors, these are called third parties. Third parties may or may not have power, and they may be impartial or biased. Examples of third parties are: mediators, supporters, officials and allies. Mediation is a method of voluntary constructive conflict management in which the goal is a win - win solution. The mediator is impartial and the mediation is confidential (Grünbaum & Lepp, 2005/2013).

## Ethical dilemmas, problems and conflicts in healthcare

ETHICAL DILEMMAS, PROBLEMS and conflicts are a normal part of everyday life even in the healthcare setting. The context, and the behavior of patients and nurses comprise the conditions for a caring relationship. When patients are affirmed in their situation, they may feel safer showing their vulnerability and needs, and this can help inform various initiatives to enhance their health (Berg & Danielson, 2007). Adopting an ethical approach requires that caregivers recognize dilemmas and have appropriate ethical tools at their disposal. Ethics is about "the external norms, laws and rules that we are expected to follow" (Einhorn, 2005, p. 21).

Ethics is based on maintaining a respectful distance from a person while also seeking closeness – demonstrating respect while also having the courage to feel love. An ethical dilemma may arise when our moral capacity is confronted with reality. We may be faced with a choice in which we must weigh up several conflicting interests and prioritize one (Hermerén, 1995). Morality has to do with how we think and act when confronted with an ethical dilemma. Acting morally requires empathy, participation and commitment. Both concepts, ethics and morality, are about relationships with others. No matter how we act in any given situation, it may seem right or wrong since the options available to us at the time may have both advantages and disadvantages (Einhorn, 2005).

## **Nurses' Code of Ethics**

A profession is characterized by how its members put their knowledge into practice, and this is relevant for the delivery of good and safe nursing (Finnström, 2014). Nurses have to relate to the International Council of Nurse's (ICN's) code of ethics, which offers guidelines for ethical conduct. The code of ethics for nurses covers four areas of responsibility, namely; in relation to the public, in relation to professional practice, in relation to the professional body itself and in relation to colleagues. One strength of the ICN's ethical code is that it provides guidelines for nurses the world over, independently of national laws. The Swedish Nursing Association (SSF) emphasizes the significance of the code's stance on human rights and urges nurses to pay attention to this (SSF, 2014). It stresses that all nursing involves ethics and moral responsibilities. It is also noted that ethical issues in healthcare are becoming increasingly complex and that this presents a challenge to today's nurses. For example, they may concern issues such as how to show respect for a patient's integrity, questions about organ donation and prioritizing care measures. Nurses are responsible for influencing the development of healthcare and using their knowledge to contribute to debate about how people's living conditions affect health.

## **Theories of Ethics**

Ethical dilemmas inevitably arise when a healthcare team collaborates in providing care for a patient. Two kinds of dilemma may be identified as a point of departure for reflection upon ethical issues and conflicts in the care setting, namely:



1. An action is performed with the objective of achieving a goal that goes beyond it. The act has no value in itself, but is a means to reach a valued goal. This means that the action can be waived if it is not necessary for achieving the goal. The person who carries out the action is a vehicle for achieving an outcome, and they are thus distinct from the result. The action emphasizes the valued result. Aristotle calls this *poesis* (Berggren, 2014).
2. The action has a value as a goal in itself. This means that goals and means are inseparable. The person is involved in the act, and when it is completed, it does not have to yield material results. The value lies in the implementation of the action and what it may also contribute to achieving a further goal. For example, joy may result from dancing together or relief, from sharing one's story and being listened to and affirmed. The action emphasizes a process towards a goal and was named by Aristotle as *praxis* (Berggren, 2014).

Various theoretical starting points may be used to guide reflection on dilemmas and conflicts:

- Deontological ethics emphasizes that it is the act itself that is important, whether it is good or not.
- Teleological ethics stresses the importance of the outcome of an act that is decisive for whether it is to be considered good or not.
- Virtue ethics emphasizes the motivations of the person who carries out the act as decisive for how the act should be awarded value. Virtues include: compassion, judgment, trustworthiness, integrity and, in the context of

care, a sense of duty to perform acts with the intention of alleviating suffering and promoting health (Berggren, 2014).

When someone who believes they know the right thing to do in a particular situation finds themselves hindered by external factors, they may feel bad. If this continues over time, it can result in moral stress, which can lead to burnout. These circumstances should therefore be brought to the attention of the healthcare team and discussed between the members (Lützén, Blom, Ewalds-Kvist & Winch, 2010).

## Drama pedagogy in healthcare and education

DRAMA PEDAGOGY ACTIVITIES include warm-up exercises and play, improvisation and role-play. Drama, or drama pedagogy as the subject is also called, has an interdisciplinary connection mainly to education, psychology, theatre, art, aesthetics and sociology. Lepp (1998; 2014) further describes how learning through drama requires pedagogical leadership, an interacting group, a fictitious scene and pedagogical goals. The process and the experience are central, which means drama can be related to the concept of the pedagogy of experience. Drama can provide insights into the way emotion, thought and action interplay in a specific context. Learning through drama involves participants being both "in the role" and simultaneously reflecting upon how they behave in the role. Taking on different roles enables participants to shift perspectives and this helps them develop empathy and understanding for others (Grünbaum & Lepp 2005/2013). Creating a good collegial atmosphere in the group is important for making the participants feel safe and positive and creating optimal conditions for learning (Larsson & Lundberg-Bouquelson, 2015; Lepp & Zorn, 2002).

The use of drama and Forum Play (a form of role-play) as a support for students' personal and professional development in nursing education have been studied by Lepp (1998; 2014; 2015) and Ekebergh, Lepp and Dahlberg (2004a; 2004b). The use of drama and Forum Play for the supervision of healthcare staff on a hospital

ward have been studied by Skott, Dellenborg, Nässén and Lepp (2013), and Zbikowski and Josephson (2017). And Arveklev et al. (2015) have carried out a review of empirical and theoretical literature on the use of drama in nursing education and found a dearth of studies looking at what happens when students try playing the role of patients and on the use of drama in nursing education at the advanced level.

The leader's pedagogical approach is very important in drama exercises since the participants' feelings and experiences are exposed. The leader must therefore establish a secure social environment so that the participants are able to take positive lessons away from the experience (Grünbaum & Lepp, 2005/2013; Berg et al., 2016).

Reflection is a core element of drama pedagogy, and it is interspersed with the role-playing exercises throughout a drama session in order to integrate theory and practice (Larsson & Lundberg-Bouquelon, 2015). It means thinking through a situation in a careful, consistent and open-minded manner that leads to a conclusion (Schön, 1987), and it helps participants relate the knowledge they acquire to the various practical tasks they perform in their professional lives (Tveiten, 2000).

## **Forum Play**

Forum Play is a pedagogical method that is used, among other things, for supervision in professional development (Lepp & Leksell, 2017). It can be described as a form of interactive theatre that gives a group an opportunity to act and reflect together about their particular reality, for example, the healthcare setting. Research has shown that drama-related methods such as forum theatre, Forum Play, role-play and case scenarios can be effective pedagogical

methods for teaching nurses and nursing students about managing conflicts (Johansen, 2012; Burton et al., 2015; Almost, Wolff, Stewart-Pyne, MC Cormick, Strachan, & D'Souza, 2016).

The content of a Forum Play builds upon the participants own experience and upon context (Lepp, 2015, 2017). Its content and the participant's attitudes can be related to evidence-based care, in both the play and reflection phases. Evidence-based care means using the best existing scientific knowledge as a basis for decision making (Willman, 2013).

Participants work in groups to create their own plays that are based on their experiences of conflict situations. This may be an explicit conflict, a dilemma, a difficulty or an uncertainty about something, and this is dramatized and enacted in the form of a short scenario. A conflict may arise when two or more people perceive themselves to have incompatible interests or opinions. When this is dramatized in the Forum Play, the thoughts, feelings and actions of both the participants and the spectators are important. The play is supposed to make it feel "as if" it is happening here and now. The objective is to then consider alternative ways of handling the situation that may be more constructive than has been enacted. In this way, individuals and the group learn to reflect upon professional dilemmas and conflicts (Byréus, 2010; Lepp 2015; Skott et al. 2013).

The use of Forum Play in nursing education may be described as "care plays" for conflict management. These have three phases that alternate throughout the play (Lepp, 1998, 2015). The phases are:

- A. Initial phase* – the participants describe and select an event from a care situation they have experienced and that has affected them.

- B. *Play phase* – consists of the Forum Play itself. The story is enacted twice, and after the second time, the "spectators" can replace the actors and intervene in order to act out the scenario in different ways.
- C. *Reflection phase* – participants reflect upon the play and the interventions.

## Learning about conflict management through drama

THE STUDENTS PARTICIPATE in a drama workshop of either a half or whole day's length. Afterwards, the student should be able to reflect upon and analyze how conflicts may arise in working life and how they may be prevented or managed. The workshop is structured with learning activities before, during and after the workshop.

Before the workshop: The students attend a 2-hour lecture about concepts and theories of conflict and conflict management. They are asked to write a few lines about a conflict situation they have experienced in the care context (as a healthcare professional, student, relative or patient) that has affected them.

During the workshop: Drama pedagogy is used to illustrate theories of conflict and conflict management and to train the students to analyze and manage conflicts. The scenarios they enact then form the basis for analysis, reflection and discussion.

After the workshop: Two weeks after the workshop, the students must submit their reflections on what they have learned in writing. This is a group task that involves responding to 10 questions, which the students discuss together with their Forum Play group and

together compile their reflections (three A4 pages). The questions are as follows:

1. What was your Forum Play about?
2. Describe the situation and the conflict.
3. Who were the parties involved?
4. Was it a symmetrical or asymmetrical conflict?
5. What happened to the conflict with the various interventions?
6. Which conflict management strategy do you think was most constructive?
7. What were the consequences for the parties?
8. What have you learned from attending the workshop?
9. How have you enhanced your conflict management skills?
10. Formulate your own question about something you have reflected on and answer the question.



# A drama programme

THE DRAMA PROGRAMME consists of a workshop containing five drama parts/sessions for a whole day. It is led by a drama teacher who is referred to as the leader. It can be helpful if a care sciences teacher participates and ensures that the care context is focused upon, that the group reflections are relevant and that ethical issues are discussed. The concept of scenario is used to describe a section of a story that is in space and time. For more concrete examples of drama exercises relating to conflict management and Forum Play see Grünbaum and Lepp (2005/2013), O'Toole, et al., (2019), Lepp (2015) and Lepp and Leksell (2017).

## Drama part 1

### Theme: Introduction

#### Exercise 1

#### Everyone who ... changes place with one another

**Aim:** To introduce drama pedagogy and the topic of conflict management, create trust and start a group process.

**Focus:** To create a group dynamic and introduce conflict situations that occur in healthcare and explore the group's experiences of conflicts and conflict management in healthcare.

**Implementation:** All participants sit on chairs in a circle. A caller

stands in the middle with no chair and calls out some general instruction, such as: "Everyone who likes ice cream swap chairs with one another". The caller then has a chance to sit on an empty chair, leaving someone else without a seat and they then stand in the middle instead. Then it is this person's turn to call out something relating to conflict management, such as: "Everyone who experienced a conflict on their most recent work placement (WP) change places".

## **Drama part 2**

### **Theme: Escalation of conflict**

#### **Exercise 2**

##### **Role-play in a row. Report from dayshift to nightshift**

**Aim:** To experience practical conflict situations and relate them to ABC theory, with a focus on conflict escalation (with possible de-escalation, situation number 4).

**Focus:** The different steps in ABC theory: (A) Attitude, (B) Behavior and (C) Contradiction and content.

**Implementation:** The participants stand in two rows, one on each side of the room. Each participant has a partner in the opposite row with whom they will later swap places. In a test round, the participants meet in the middle of the room, greet each other and then go to the opposite side of the room. The two members of a pair should then be involved in role-playing with one another in the middle of the room and when this ends, each goes to a different side. They should meet in each of the following conflict situations. The participants in one row act as nurses working a nightshift, and those in the other, are nurses working a dayshift. They should keep their role throughout the exercise, regardless of which side of the room they end up on (alternatively, they can swap roles in the second round).

- *Situation 1. Monday evening*

A nurse who has worked a dayshift (afternoon and evening) reports to a nurse who is about to start their nightshift. The day staff should have prepared the patients for bed before handing over to the night staff. But for some reason, the day staff have not been able to do this today, and they explain this. (Both parties focus on step C, the contradiction about the issue at hand).

- *Situation 2. Wednesday evening*

A nurse who has worked a dayshift reports to a nurse who is about to start their nightshift. The day staff should have prepared the patients' supper before handing over to the night staff. For some reason, they have again been unable to do this today, and they explain this. (The night staff focus on step A, attitudes).

- *Situation 3. One week later*

In the past week, it has happened several times that the day staff have been unable to prepare the patients' supper or get them ready for bed or for examinations the following day. They offer various explanations and excuses each time but the night staff are beginning to tire out of this and no longer trust the day staff's explanations. They have lost confidence in the day staff. One very annoyed member of the night staff therefore begins to question the explanations offered by the day staff. (The night staff focus on step B, behavior).

- *Situation 4. Two weeks later*

Situation 4 can be used if it has been decided in advance that de-escalation is going to be tested in Forum Play. A nurse who has worked a dayshift reports to a nurse who is about to start their nightshift. They have both reflected upon and discussed with others the problems of the high workload on the ward, and they want to find a more constructive way to handle the situation. (The parties focus on both attitude (step A) and the con-

tradition and content (C) and try to transform it into a constructive interaction.

**Reflection:**

- In groups consisting of two pairs: Reflect on what happened in your role-play. Was it realistic? Can you relate what happened to theories of conflict management?
- In whole group: The participants talk about what they discussed and relate this to theories of conflict management.

### **Drama part 3**

#### **Theme: Conflict styles**

##### **Exercise 3: 1**

##### **Role-playing – teamwork**

**Aim:** To test how different conflict styles find expression in teamwork. To reflect on and evaluate experiences gained from the exercises and relate these to concepts of conflict management and to a future role in the nursing profession.

**Focus:** To identify the strengths and weaknesses of various conflict styles in the context of care.

**Implementation:** Brief theoretical review of the different conflict styles written on the whiteboard:

- Lion                      Fight
- Camel                     Adaptation
- Turtle                     Avoidance
- Fox                        Compromise
- Owl                        Collaboration
-

Create groups of 4–6 participants. Each group is a team and will decide which professions are to be represented on their team. During the role-play, the team holds a meeting about visiting hours on a ward. Each participant should prepare in advance what the character they are going to play wants (how frequent and how long the visiting hours should be) but they do not tell the others. Once they have decided, the leader secretly tells each group to enact a particular conflict style, which the whole group will later enact. In the next step, each group selects a short sequence from its role-play that they then re-enact for the other groups to see. This sequence should clearly illustrate the conflict style they have been assigned. The observers then guess which style of conflict they are trying to demonstrate.

**Reflection:** How was the mood in the group? Did the group reach a decision? Which? Why? What were the strengths and weaknesses of the different conflict styles? What were the consequences? How was the play affected by the power relations between the parties? How was the conflict handled? Who won? What kind of conflict management could help the team reach decisions that satisfy everyone's needs?

### **Exercise 3:2**

#### **Role-play – Staff Meeting**

**Aim:** To experience, reflect on and evaluate how the different conflict styles may be expressed in a healthcare workplace.

**Focus:** How the different conflict styles are affected by circumstances and power differentials. To discuss conflicts in relation to group dynamics and psychosocial work environment.

**Implementation:** Create groups of 4–6 participants. Each group constitutes a team at a healthcare center and the role-play will take the

form of a staff meeting. Each participant may choose a professional role to play. Before starting the role-play, each participant must decide what they want regarding renovation of the waiting room. Each person should act out what they want, according to their chosen professional role and the conflict style they have been assigned. This time, each participant in each group is assigned a different conflict style to enact.

**Reflection:** What differences were noted between the previous role-play and this one? What are the consequences of everyone in the group having the same conflict style or different ones? What strengths and weaknesses do the different conflict styles have? In what way did the different roles influence each other: group dynamics, group development, psychosocial work environment and power differentials. Did the situation feel realistic? Can you relate the situation to your own experiences?

## **Drama part 4**

### **Theme: Forum Play for conflict management**

#### **Exercise 4:1**

#### **Stories of perceived conflicts**

**Aim:** To learn about each other's experiences from work placement (WP). To develop the ability to listen to one another and be listened to. To describe and explain a conflict situation involving the participant. To create scenarios for Forum Play.

**Focus:** To highlight conflicts from the participants' WP in health-care.

**Implementation:** Working in groups of about 5, each person tells the others about a conflict they experienced during their WP.

## Exercise 4:2

### Creating scenarios for Forum Play

**Aim:** To create scenarios that can be used to perform Forum Play. To reflect on, process and evaluate different types of conflicts in healthcare.

**Focus:** Escalation of a conflict.

**Implementation:** The group participants select one of the conflict stories that a member has told and that they would like to examine in greater depth. The task is to create one or more short scenes from the selected story. These should portray a conflict that escalates and end when the conflict climaxes. Each scene should be 3–5 minutes long, with a clear beginning, escalation and culmination point, when the conflict comes to a head.

## Exercise 4:3

### Forum Play

**Aim:** That all participants should see the Forum Play so that they make use of material from it during the rest of the workshop. To explain how various elements relate to one another, analyze and identify patterns in the material. In consultation with the leader, decide how to organize continued the remaining work and time spent on Forum Play.

**Focus:** Gain an overview of the contents of the scenarios and search for a pattern. Relate theory and practice to one another.

**Implementation:** One group at a time enacts its Forum Play.

**Reflection:** The leader and participants together list which conflicts the participants noted in each Forum Play. Participants are encouraged to reflect on the conflicts in relation to theories presented in the lecture and throughout the workshop; What kind of conflicts

are there, what similarities and differences are noted between the various conflict situations?

#### **Exercise 4:4**

##### **Forum Play with intervention**

**Aim:** To test and develop the ability to reflect on and deal creatively with conflicts in a future role as a nurse. To develop an understanding of the dynamics of conflicts and the consequences of different ways of behaving. To develop the ability to understand different parties' perspectives.

**Focus:** Conflict management and reduction of conflict. To integrate theory and practice.

**Implementation:** Together with the leader, the group chooses which Forum Play to enact first. The person who incites the conflict or subjects someone to inappropriate or unethical behavior is selected. This person should not be replaced because they are the person the others must learn to respond to in a constructive manner. The group then begins to perform its scenario again and the spectators try various interventions to manage the conflict more constructively. The spectators can shout 'STOP' as soon as they think events are developing negatively and they can then direct or take over the role-played by one of the actors in order to try out different ways of handling the conflict.

**Reflection:** Reflection takes place continuously throughout the Forum Play. After each break, the leader asks the person who intervened how they thought it went. Did they manage to test the actors' intentions? What happened and how did it feel? Then the leader asks the actor how they felt about the intervention. How did it affect the intervener? The leader also asks the person who performed being subjected to inappropriate behavior how the inter-



vention affected them. The participants may also need a little time and even a structured “derolment”, to process the emotional content.

## **Drama part 5**

### **Theme: Completion of the workshop**

Proposal for the conclusion of a drama workshop, see Drama part 6 in Berg et al.’s (2016) report.

## Teachers' experiences of the drama programme

MANY STUDENTS SAY at the beginning of the workshop that they want to learn simple, concrete methods for managing conflicts. However, in the course of the workshop, they express a growing appreciation of the complexity of different conflict situations, and the importance of being able to see a conflict from different perspectives. This in turn helps them see various options for managing conflicts. Instead of seeking the ultimate way of resolving a conflict, the students learn to test different methods of conflict management and to observe their effects. In the ensuing discussion, the students reflect upon the strategies that have been used in their interventions. The exploratory work method and the ability to reflect individually and in groups should contribute to the students' ability to develop new knowledge, understanding and skills for continuous development and greater readiness to take action in their future working lives.

It is hoped that the students will not only gain knowledge about conflict and conflict management from the workshop, but that they will also feel equipped with drama methods they can use in further studies and their future working lives. Systematic individual and collective supervision and reflection helps them create new knowledge and progress towards becoming what Schön calls reflective practitioners (Larsson & Lundberg-Bouquelson 2015; Schön 1983).

It has been noted over the years of using drama pedagogy in the nursing programme that some conflicts reoccur frequently in the Forum Play. The conflicts are about:

- *Conflicts between student and supervisor:*  
Supervisors who are not interested in the students and therefore behave impatiently or exploit students as an extra resource without guiding them.
- *Conflicts between different staff groups:*  
Auxiliary nurses who say that the nurses just sit at the computers instead of working with the patients while the nurses say they do not have enough time to complete their administrative tasks.  
Nurses who say that doctors ignore them, which, they claim, also affects the patients.  
Staff who have conflicts with one another in front of patients.
- *Conflicts between relatives, patients and nurses:*  
The wishes of the patient differ from those of their relatives and the nurse finds it difficult to safeguard the patient's interests.
- *Conflicts of refusal:*  
Healthcare professionals who do not do their job or refuse to perform certain tasks.
- *Conflicts between staff and the manager:*  
Different opinions about needs and resource allocation.  
An uncommitted manager.

## Nursing student's experiences of the drama programme

ARKEKLEV'S DOCTORAL STUDIES include a study of the use of drama in the last year of the nursing programme. This study was conducted between 2013 and 2015 and is based on 43 written group examinations. The aim was to illuminate nursing students experiences related to learning about conflict and conflict management through drama. Two weeks after participating in the drama workshop, the students submitted a compulsory written group examination in which they reflected on their own learning about conflict management (Arveklev, Berg, Wigert, Morrison-Helme & Lepp, 2018). The data was analyzed using qualitative content analysis (Graneheim & Lundman, 2004). This resulted in an overall theme: *To learn by oscillating between closeness and distance*, and the following three categories:

- To approach and integrate with the theoretical content.
- To step back and get an overview.
- To concretize and practice. (Arveklev, et al., 2018)

Below are quotes from the students that fall into each of these categories. For a more detailed description, please refer to the doctoral thesis, *Drama and Learning in Nursing Education. A study in first and second cycle* (Arveklev Höglund, 2017).

## **Category: To approach and integrate with the theoretical content**

It became clear that the drama exercises gave the students an opportunity to test their theoretical knowledge about conflicts in practical situations. Enacting a role allowed them to integrate new theoretical knowledge with previous experiences of conflicts. The students' statements reveal that they felt this enabled them to build their own understanding of what a conflict might mean. Many stress the fact that they realized that conflict is not necessarily dangerous and does not have to be avoided at all costs, and that it is sometimes inevitable and may be of use for the development of both individuals and organizations.

The students describe how playing a role and observing others enacting it made clear to them how theoretical principles, such as ABC-theory and conflict styles, could be applied in analyzing conflicts. The concept of conflict became less abstract and easier to grasp. The students also noted how the different conflict styles were illustrated through drama and how this helped them see how they could influence the different parties to a conflict. They stated that the self-reflection that this prompted enhanced their awareness of which style of conflicts they themselves often use in conflict situations.

- This has increased our conflict management competence because our knowledge about how conflicts arise and develop has grown.
- We learned about different conflict styles. This meant we could identify them more easily, which makes it easier to handle them.

### **Category: To step back and get an overview**

The second category shows how drama helped the participants take a step back from their immediate emotional responses and adopt a meta-perspective of the conflict situation. The students stated that group reflections on the enactments helped the participants, in dialogue with their classmates, analyze their own and other people's experiences. It became clear to them how important it is to be aware and responsive to their own and others' needs and motivations in conflict situations. The statements also illustrate the importance of understanding that different people may have different perceptions and reactions in the same situation as well as how power asymmetry can affect those involved.

- We have also risen to a higher level of abstraction level and can now look at a conflict with a bird's eye view.
- ... The self-insight we have gained can help when we are involved in a conflict and can also help us see why others do what they do.

### **Category: To concretize and practice**

The third category shows how drama can be used as a tool to concretize conflicts and conflict management. The statements illustrate how drama prepares students to foresee, prevent and manage conflicts. A key factor identified in conflict prevention is the ability to recognize a charged situation before it escalates, focus on the matter in question, acknowledge the needs of all involved and understand their perspectives. The students also noted that it is important to dare to act instead of ignoring the first signs of a conflict and to be innovative and dare to try different strategies.

- An important part of conflict management is paying attention to situations that could potentially have led to conflict and the small conflicts that one would prefer to avoid.
- We have learned to be humble before a conflict, to dare to use different strategies to deal with conflicts and not to give up when it several attempts may be required.

## Final reflections

THE DRAMA PROGRAMME described in this report has been used in the nursing programme at the University of Gothenburg and has also been the basis for research. Its purpose is to support learning about conflict management in healthcare and to increase the conflict management skills of prospective nurses. The methods used in drama pedagogy provide an active and creative way to learn that is well suited for student-centred learning. Student-centred means starting from the student's own experience and then relating that to current theory and practice in group discussions. Drama allows the students to enact situations, ethical dilemmas, problems and conflicts from the healthcare context in order to practice, test, reflect, discuss and learn about conflict management. Situations that the students have encountered or are likely to face in their future professional lives are in focus.

Teaching this drama programme requires competence in the following areas:

- Conflict management
- Drama pedagogy
- Nursing
- The healthcare context.



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## Suggestions for Further Reading about Conflict Management

**Konflikt:** [*Conflict*].

[http://socav.gu.se/digitalAssets/1421/1421368\\_22konfliktabc.pdf](http://socav.gu.se/digitalAssets/1421/1421368_22konfliktabc.pdf)

**Konfliktstilar:** [*Styles of Conflict*].

<http://www.hanterakonflikter.se/konfliktskolan/konfliktstilar/>

**Konflikter och konflikthantering:** [*Conflicts and Conflict Management*].

<http://socav.gu.se/Samverkan/arbetsplatskonflikt/konfliktakademien>

**Lära för fred. Från våldskultur till fredskultur:** [*Learning for Peace – from Global Culture to a Culture of Peace*]. [www.laraforfred.se](http://www.laraforfred.se)

## Authors' presentations

**Linda Berg** is a registered nurse (RN) and nursing teacher (RNT). She holds a Masters degree in nursing, a PhD in health care science and is Associate Professor in care sciences. She is a senior lecturer at Kungälv Hospital and at the Institute of Health and Care Sciences, Sahlgrenska Academy, University of Gothenburg. Her research focuses on patients' experiences of daily care, palliative care, ethical problems in the care setting, with a specific focus on the care environment. She is also interested in pedagogical development in nursing education and the integration of theory and practice.

**Susanna Höglund Arveklev** is a registered nurse (RN) and nursing teacher (RNT). She holds a Masters degree in nursing, and a PhD in care sciences from the Institute of Health and Care Sciences, Sahlgrenska Academy, University of Gothenburg. In her doctoral thesis she examined student nurses' learning through drama pedagogy. Her research focuses on learning in higher education, health promotion and salutogenesis. She works as a Senior Lecturer on the nursing programme and the programme for social psychiatric care, and she is the Director of center for Salutogenesis at University West, Trollhättan.

**Stina Larsson** is a drama teacher (RAD) and holds a BA in drama education. She works as a Lecturer at the Department of Sociology

and Work Science and the Institute of Health and Care Sciences, University of Gothenburg. She teaches on both the nursing and teaching programmes and offers supervisor courses in healthcare, school and care in conflict management, group dynamics, leadership, social relations and communication.

**Margret Lepp** is a registered nurse (RN), nursing teacher (RNT), drama teacher (RAD), PhD in pedagogy, and professor at the Institute of Health and Care Sciences, Sahlgrenska Academy, University of Gothenburg, Gothenburg, Sweden and Østfold University College, Haldén, Norway. Her research focuses on learning through drama, health and wellbeing, professional supervision, internationalization and conflict management. She is Adjunct Professor at Griffith University, Gold Coast Queensland, Australia, and a Visiting Professor in Faculty of Medicine, Public Health & Nursing, Universitas Gadjah Mada, Yogyakarta, Indonesia.



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Institute of Health and Care Sciences  
The Sahlgrenska Academy  
University of Gothenburg  
Box 457, 405 30 Göteborg, Sweden

Phone: 031-786 00 00  
E-mail: [ckh.gu.se](mailto:ckh.gu.se)  
Website: <http://www.ckh.gu.se>



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Knowledge about conflict management is necessary in today's increasingly stressful working environment in the health and medical system, because the working climate affects the staff and increases the risk of interpersonal conflicts. If these conflicts are not resolved or if they are dealt with incorrectly, they can have a negative impact on both the organization and the healthcare staff and patients.

The present report deals with how the subjects nursing, conflict management and drama education can be integrated and used to support nursing students' learning with focus on conflict management. The report highlights the teaching component of conflict management in the course Leadership and Learning (OM4380) 15 ECTS credits. The course is given during the last year of a total of three years in the nursing programme at the University of Gothenburg, the Sahlgrenska Academy, the Institute of Health and Care Sciences. The teaching task of conflict management with drama has been implemented since 2008.

The report is intended to be used as an educational tool and is aimed at anyone who seeks knowledge about how drama education can be used with focus on conflict management. It is aimed at students, teachers and practically active in education, health and care where the meeting between student, caregiver, patient and related party is crucial for the development of professional competence and high quality of care.

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