Social Media, E-Professionalism And The Image Of Nursing: How One Nurse Can Reach Many!

Associate Professor Vicki Cope, School of Health Professions, Murdoch University, Perth, Western Australia

Abstract This paper considers social media and e-professionalism and the image of nursing and reports on a project, centred upon the question: What is a nurse? It explores the response to a recent Miss America pageant where, for the talent section of the show, a contestant performed a monologue and discussed her profession as a nurse. What ensued was media furore following release to television and YouTube as the contestant’s speech was viewed worldwide. Subsequent to this, a group of postgraduate students were asked to review the YouTube video of the contestant and write a critical reflection on the role of a nurse in contemporary healthcare.

Background
In the 25 years since Tim Berners-Lee made the ‘World Wide Web’ (www) more than half the world’s population in 2017 uses the Internet. It is now relatively quick and easy for most people to upload, download, share, cut and paste, tag and comment on anything and everything in digitalised format on social media (SoMe). Apparently 1.28 billion Facebook users check their profiles daily with 500,000 users added every day [2]. Given this proliferation of social media through internet access and mobile devices, it is especially important to consider how to use this mass means of communication, and how to do it wisely, especially if you have a professional image to uphold.

News is now shared worldwide almost instantaneously and young people like the Miss USA contestant have grown up in the global community connected by the digital world. This creates unique concerns of its own as due to the massive content sharing, unlimited ability to comment and tag with few ramifications, as many young SoMe users may be naive of the consequences of that sharing and the upshot of same.

Further, what constitutes professionalism may be hard to define but it relates to the conduct and behaviour of individuals in meeting the standards and values set by its own selfregulating profession for the good of the people and society it serves. Each individual is in a position of trust to uphold the professions standards and to present to the world ‘professional behaviour’ when representing their profession.

“Eprofessionalism is a new form of professionalism…and is defined as the attitudes and behaviours that reflect traditional professionalism paradigms but are manifested through digital media” asserts Kaczmareczk et al, (2013, p.166). [3]. Eprofessionalism encompasses any presentation pertaining to professional identity, professional behaviour and professional attitudes within an online environment in any format. With this in mind, the ramifications of the Miss USA digital capture caused many to question: was the Miss USA contestant media savvy or not? What was her message? Did she use her time in the spotlight wisely? Did she really consider the sequela of her talent show? Had she considered the professional/eprofessional ramifications of her discourse?

In the digital world, once content it is on the www, it is in the ether, not able to be deleted. “Discourse in social media is accessible to a much wider and often unknown audience and can linger in perpetuity” asserts Kaczmareczk et al, (2013,
The contestant’s public declaration of “I am just a nurse” was perturbing to many. It may have just been a poor choice of words, but the words themselves demean the value and reputation of the profession and were on the web for perpetuity. While the contestant may have been trying to highlight the profession and the work that she loves, a short lapse of judgement in her delivery reflected badly on many and the damage was done in an instant. The stereotypical imagery associated with being ‘just a nurse’ has surrounded the profession for eternity and sadly still continues. The disconnect remains with what a nurse is in contemporary healthcare and the old image of perhaps what a nurse was, persists. Consequently an assessment piece was set, to explore what a student cohort considers ‘what is a nurse?’ and to challenge their reflections of their own image with regard to comparison to the discourse by the Miss USA contestant through the means of critical reflection.

The purpose of reflective learning is widely accepted to improve personal and intellectual growth. [4] Critical reflection assists in ‘thinking things through’ or ‘giving thought to actions’ which brings new insights to problems, enabling re-evaluation, lateral thinking, problem solving and moving forward. The process of writing helps us to reflect, forming words, re-working them with due consideration until a deliberate, valued critical reflection is produced evidencing required learning and a growing professional knowledge [5]. This research was approved by the University Human Research Ethics Committee - Project Number 14269. The findings of the student cohort’s critical reflection are presented to follow.

Data analysis

The responses by the post graduate nurses were analysed using Graneheim and Lundman’s (2004) method of content analysis. [6] First the student’s texts were read and re-read in order to understand the content of their submissions. The meaning units (words, sentences and phrases) were highlighted in order to create a preliminary list of broad codes which were later condensed and honed until finally at the end of the process they became the final themes. An independent research colleague with qualitative research expertise read each critical reflection repeatedly and then extracted and confirmed the final themes.

Findings

Seven major themes emerged from content analysis of the data of what it is to be a nurse.

These were: advocate, comforter/provider of care, scientific knowledge, skills and research-based practice, life-saver, critical thinker and problem solver, educator and communicator. Due to constraints of space each theme will be presented through samples of the student’s responses. Reflections on the image of nursing are also offered. Student participants have been given pseudonyms to maintain confidentiality of their responses where their text is used verbatim.

Advocate

As described below the student’s statements reflect a focus on advocacy for their patients. “Nurses are the main source of support and advocacy to their patients,” noted Manuel (verbatim).

“Nurses…keep the patient as their focal point of consideration” wrote Aria (verbatim). “My role has been one of patient advocate, clinician, and educator.” (Clementine, verbatim) whilst

“The role of a nurse is a clinician, health care coordinator, patient advocate and comforter” penned Hari (verbatim). All student responses echoed these sentiments, emphasising that nurses often intercede for their patients on their behalf with regard to care planning, and as liaison between themselves and the multi-disciplinary team. To be an advocate, nurses need to possess knowledge about all aspects of a patients care and have a therapeutic relationship with the patients in their care.

Comforter/provider of care

Many nurses enter nursing studies with the aim of helping others through the relief of physical, mental or emotional suffering. Nursing is seen as the caring profession. Student’s responses reverberated with this aspect of what is a nurse?

Responses included: “Nursing is profession of compassion, a profession of knowledge and skills and a profession of courage because nursing is the front-line profession that deals directly with patients.” (Manuel, verbatim). “Nurses are constantly present… for care…all the patients’ rooms have a…. nurse calling bell however there is no ringer for specialists or physio or for other medical or non-medical stuff… to the extent they act as a guardian, advocate… and more.” (Aria, verbatim). “To support the patients both physically and psychologically…considering patients as persons, not just a room number or a diagnosis” (Jo, verbatim). Compassion has been extolled as a character trait within aspiring nurses, and it may be fashioned and nurtured further through practical experience in nursing. Its significance would seem to be recognised by the student cohort in the make-up of a nurse.

Scientific knowledge, skills and research-based practice

The students acknowledged the underlying knowledge and skills required for nurses to be safe, competent practitioners in contemporary healthcare. They said: “Nursing has changed now focusing on professionalism and research based practice.” (Clementine, verbatim). “Nursing is physically demanding – standing on your feet almost all day, very often carrying and turning heavy items, and sometimes you get so busy to the point that you don’t have time to eat or go to the bathroom. It is also mentally and emotionally demanding – you are constantly assessing, measuring, intervening, and re-assessing, using critical thinking skills, and always learning new things.” (Manuel, verbatim). “I am a competent, well-educated, skilled and kind hearted leader” (Lina, verbatim). “I am not just a nurse but a professional with high level of expertise and adequately equipped to meet my patients’ needs….an expert, a professional…helping in a more
professionally scientific way” (Meg, verbatim). The students reflected upon their personal expertise in using scientific assessment and involvement in research to make clinical decisions affecting patient care, explicitly noting the use of evidence-based research findings in practice.

**Life-saver**

Students believed that nurses were in the best position, that is, by the bedside, to recognise and respond appropriately to changes in patient’s clinical condition. They wrote that this nursing often meant the difference between life and death. Responses included: “As a critical care nurse at the bedside of the patient, I am the first one to notice the tiniest change in the patient’s condition and take appropriate actions accordingly. This takes constant vigilance and analysis and complex problem solving skills during the whole 12 hour shift.” (Lina, verbatim). “A nurse is the first person to identify any improvement or worsening of the condition and manages them accordingly.” (Jo, verbatim). “The ability to recognise and respond effectively to unexpected or rapid changing situations…is a vital factor in …clinical settings to save patients.”(Manuel, verbatim). “Nurses have a crucial role in monitoring and reporting of health status and the treatment effectiveness of the current health intervention.” (Hari, verbatim). This students felt this bedside presence enabled the nurses to be there when the patient required life-saving.

**Critical thinker and problem solver**

“We are critical thinkers…critical thinking skill is one of the most important skills that a nurse should have. Critical thinking helps in early detection of potential problems that the patient might experience and a nurse with this skill could save patients’ lives,” wrote Manuel (verbatim). Clementine agreed when she wrote: “Nurses must be highly skilled individuals, adaptable, critical thinkers, leaders, advocates, teachers and excellent communicators. They have to be able to adapt to any given situation, conveying professionalism at all times, build trusting relationships and show empathy towards peers, patients and families alike”. (Clementine, verbatim) and Meg reiterates: “I have to make decisions on daily basis which have direct effect on patients’ health.” (Meg, verbatim).

**Educator**

For this student cohort, education to both patients and peers were part of the make-up of a nurse. “I also participate in … searching the relevant literature, gather research data for ongoing practice improvement and finally facilitate education sessions for other staff,” notes Lina, (verbatim). “Nurses supervise new clinical staff and plays the role in the management and ongoing education of other clinical nurses…instructing, doing research and … the role of the nurse does not end here, there is education … responsibilities on…health promotion, illness prevention, antenatal and postnatal care, community development, policy development and advocacy, so the value of nursing profession cannot be underestimated.” (Aria, verbatim).

**Communicator**

Statements concerning nurses acting as communicators between themselves and patients, as communicators and links between patients and others within the health car team and between peers were written by the students. These included: “In addition to providing medical needs, I am an educator for my patient, an advocate, a counsellor, a communicator, a bridge-builder…an interpreter….but also comforting emotional support” (Lina, verbatim). “Trust leads to great communication between nurses and patients and that indicates patient centred care…healthy bonding between a nurse and a patient also promotes good communication” notes (Aria, verbatim). “There is a need to bring nursing professionals together in order to discuss ideas and concerns… through sharing ideas…and comparing the experiences of everyone…aiding patient and staff” (Hari, verbatim). Communication skills are imperative for good team functioning and for safe, quality care of patients.

**Discussion**

Nurses have often bemoaned that the public generally do not know what we do and what we can do. Buresh and Gordon’s seminal work in 2000 *From Silence to Voice: what nurses know and must communicate to the Public* made the compelling call for nurses to tell the public what they do, yet sometimes when they do, as in this instance, things do not necessarily go as well as planned. [7] Recently Kelly, Fealy and Watson (2012) reviewed nursing identity as revealed by You Tubes and found that three identity types still prevailed. These were: the nurse as a skilled individual, a sexual plaything or a witless incompetent. The authors then called for a counter discourse on their findings. [8]

The data provided insights into the postgraduate nursing student’s view of what is a nurse? The responses tied nursing with a number of substantial themes and reflected nursing values or traits such as advocacy, caring and compassion, competency in knowledge and skills, the ability to save lives through problem solving and clinical intervention, their role as educator and communicator, all add to what should be known as the image of nursing. These values have been replicated in current nursing literature by Elliott in 2017 [9]. Nurses are educated life-saving professionals and communicators yet unfortunately we do not seem to be able to communicate our work to the public and to make our image real. [10]

What was evident however in the responses by the students was the absence or low prevalence of discussion concerning themes such as Leadership, Safety, Ethical Practice and the lack of comment concerning professionalism specifically E-professionalism and the use of social media, which are all issues relevant to nursing today. Attention should have been paid to e-professionalism and what the students considered to be appropriate or inappropriate online behaviour by a nurse. The “Digital footprint” noted by Greysen, Kind and Chretien in
2010, [11] and left by the contestant reflected badly on the profession as a whole, and mention of the blurring of boundaries of what is personal versus what is professional in social media, professional conduct, and the ethical, legal and professional implications of online behaviour and activities should have been discussed.

Nurses are no longer the doctor’s handmaiden, yet the Miss USA contestant said “I am just a nurse” undermined the years of work that others have done to make obvious that nurses are knowledgeable, skilled with depth and breadth of knowledge and practice are expertly competent to provide safe and effective nursing care. This continued use of “I am just a nurse” undermines our own self-esteem, self-confidence and that of our colleagues. One student Lina pondered: “Just like Kelly, at some occasions while under work pressure, fatigue or in exhaustion, either in softer or louder voice, I have also said that ‘I am just a nurse’. That repressed voice in my head…failed to recognise, acknowledge and appreciate all the great things I do as a nurse.” (Lina, verbatim).

Let’s turn this around. Let’s look for a positive outcome from the widespread discourse concerning what is a nurse? and what a nurse does that took place. For too long nursing has been ‘invisible’ and a ‘silent voice’. At least this digital and print coverage sparked debate about what it is to be a nurse. Although some backlash occurred in this instance, it would be remiss of the profession not to acknowledge the reach of one nurse and to consider the potential of the Internet to really show what a nurse can do and is doing and make use of it. The campaigning by other nurses and the furious response to the US TV show The View which questioned why the contestant had a ‘Doctors stethoscope’ as part of her costume caused ire. Twitter responses with hashtags such as #nursesunite and #notjustanurse and images of ‘See my stethoscope’ flooded social media. Student Lina responded: “I carry my stethoscope as an essential tool for patient assessments, which further helps me to determine any changes in my patient’s present condition so that I can take immediate optimal action.” (Lina, verbatim).

Implications for education and practice

One of the major functions of nursing education is development of professional identity formation and is an essential learning outcome within nursing core units. Professional issues is a mandatory assessment where students must demonstrate capacity to meet the Standards of the profession within their Codes of Conduct and Ethics. As such, e-professionalism should be an essential and increasingly important element of professional identity formation, and its ramifications included in undergraduate and postgraduate nursing education. Further, local/national social media and e-professionalism guidelines for nurses and midwives should be developed.

Limitations

Text always involves multiple meanings and is subjective due to the nature of the researcher, and this presentation of findings relates only to the group of participants within the study. It is the readers decision to consider the credibility of the findings as presented, allowing the ‘text to do the talking’ and to consider for themselves whether the themes and meanings would be transferable to another context.

Conclusion

Illustrated has been the uptake by social media of the ‘talent’ of one nurse and how far her ‘talent’ spread. The misguided use of “I am just a nurse” by said nurse, fuelled discourse about nurses and nursing and created a social media frenzy. Social media is now so much a part of our lives, it is unlikely we will ever stop using it, nevertheless, an increased social media awareness and the issues concerning e-professionalism among nursing students and those who are already registered should be a required professional skill for nursing professionals in the realm of contemporary healthcare.

The importance of reflection in higher education and across disciplinary fields is widely recognised. It is generally embedded in graduate attributes, professional standards and course objectives and is an alternative way of understanding and unpacking how learning is realised. Creative teachers can choose reflective tasks with application to contemporary issues within nursing that can enable higher education students using the virtual world to have ‘real world’ scenario thinking.

References


