PART I

Introduction to Curriculum Development in Nursing Education: The Evidence-Informed, Context-Relevant, Unified Curriculum
Chapter Overview

Curriculum development in nursing education is a scholarly and creative process intended to produce an evidence-informed, context-relevant, unified curriculum. It is an ongoing activity in nursing education, even in schools of nursing with established curricula. The extent of the development ranges from regular refinement of class activities and assignments to the creation of a completely original and reconceptualized curriculum. In this text, curriculum development activities are presented individually for ease of description and comprehension. However, emphasis is on the idea that the curriculum development process does not occur in ordered, sequential stages or phases. The process is iterative, with some work occurring concurrently, and with each new decision having the potential to affect previous ones.

This chapter begins with definitions of curriculum, and an evidence-informed, context-relevant, unified curriculum, followed by a description of curriculum development in nursing education. The Model of Evidence-Informed, Context-Relevant, Unified Curriculum Development is presented. It comprises a summary of the major aspects of the curriculum development process, serving as an advance organizer for this text. Additionally, attention is given to some of the interpersonal issues that can influence the curriculum development team, and hence, the completed work. The ideas about the curriculum development process introduced in this chapter are discussed more comprehensively in succeeding chapters.

Chapter Goals

- Review definitions and conceptualizations of curriculum.
- Ponder the meaning of curriculum as evidence-informed, context-relevant, and unified.
- Consider processes to enhance the scholarly nature of curriculum development.
- Overview the Model of Evidence-Informed, Context-Relevant, Unified Curriculum Development in Nursing Education
- Appreciate the interpersonal aspects of curriculum development.
DEFINITIONS AND CONCEPTUALIZATIONS OF CURRICULUM

Definitions of curriculum have been in existence since about 1820, first used in Scotland and then professionally in America a century later (Wiles & Bondi, 2007). The word comes from the Latin currere, to run, or to run a course (Wiles & Bondi, 2011), and originally meant the knowledge passed from one generation to the next (Wiles, 2005). A common understanding of curriculum is a program of studies with specified courses, leading to an academic certificate, diploma, or degree.

There have been so many definitions, often in response to social forces, that the scope and interpretation of curriculum have greatly expanded, creating some uncertainty and divergence of opinion about the meaning and intent of the word. However, definitions are important, because “they convey educators’ perceptions, and in turn, these perceptions affect how a curriculum is used and indeed, even whether it is used at all” (Hensen, 2010, p. 9). Additionally, the definition specifies the scope of work to be completed by curriculum developers (Wiles & Bondi, 2011).

Oliva (2009) defines curriculum as:

A plan or program for all the experiences that the learner encounters under the direction of the school. In practice, the curriculum consists of a number of plans, in written form and of varying scope and detail that delineate the desired learning experiences. The curriculum, therefore, may be a unit, a course, a sequence of courses, the school’s entire program of studies—and may be encountered inside or outside class or school when directed by the personnel of the school. (p. 7)

Another perspective of curriculum is “a desired goal or set of values that can be activated through a development process, culminating in experiences for learners” (Wiles & Bondi, 2011, p. 5). These authors go on to state that the extent to which the experiences represent the envisioned goals is dependent on the effectiveness of the curriculum developers.

Parkay, Anctil, and Hass (2010) provide a broader description and give attention to the idea of theoretical and research bases for curricula.

Curriculum is all of the educational experiences that learners have in an educational program, the purpose of which is to achieve broad goals and related specific objectives that have been developed within a framework of theory and research, past and present professional practice, and the changing needs of society. (p. 3)

They explain that:

- The curriculum is preplanned and based on information from many sources.
- Objectives and instructional planning should be based on theory and research about society, human development, and learning.
- Curriculum decisions should be based on criteria.
- Students play an important role in the experienced curriculum.

Many other conceptualizations exist: a written document, planned experiences, a reflection of social emphases, planned learning outcomes, hidden or visible, and living or dead (Hensen, 2010). Hensen summarizes these definitions and interpretations into three categories: means versus ends, content versus experiences, and process versus plan. Oliva (2009) also reduces the many views of curriculum to three categories. Some focus on purpose, what the curriculum does or is meant to achieve; the context in which the curriculum is implemented, possibly revealing the underlying philosophy, such as a learner-centered curriculum; and strategy or particular instructional or learning processes. Somewhat similarly, Wiles (2005) categorizes definitions according to the emphasis on curriculum as subject matter, a plan, an experience, or outcomes.

Lunenberg (2011) offers a category that is markedly different from those previously described: the nontechnical approach. This refers to ideas about curriculum that are more esthetic, emotional, political, and visionary, and less concerned with the how-to of curriculum development, implementation, and evaluation. For example, Diekelmann and Diekelmann (2009) propose a phenomenological, interpretative approach, termed narrative pedagogy, in which storytelling is the basis for interpretation and learning. The stimulation of thinking, not content, is at the heart of teacher activity. Freire (1970/2001) views education as a process of conscientization, the development of critical awareness of one’s social reality through reflection and action, and curriculum as the creation of knowledge by learners and teachers together, within the context of their lives (Freire, 1998). Attention to political, social, gender, and/or personal perspectives is strongly evident in views such as critical pedagogy (Giroux, 2011), feminist pedagogy (Crawley, Lewis, & Mayberry, 2008; Shrewsbury, 1997), and transformative learning (Mezirow, Taylor, & Associates, 2009). The premises of the nontechnical approaches can overlap and may be combined, as exemplified in critical feminist pedagogy (Chow, Fleck, Fan, Joseph, & Lyter, 2003), often extending to include matters of race, culture, and sexuality. In descriptions of these education and learning approaches, attention is given to the underlying philosophies and to the processes of personal transformation, dialogue, reflection, inclusion, and democracy that should occur within and among students and teachers. The logistics of a formal curriculum, such as course sequencing, are not the focus of nontechnical curriculum approaches, although in professional programs, such as nursing, the nontechnical approaches can be used within the structure of a formal curriculum.

Finally, Joseph (2011) views curriculum much more broadly than any of the previous descriptions. She conceptualizes curriculum as culture with “complex sociopolitical,
political, and ethical layers of meaning” (p. 3), and recognizes that many cultures can exist simultaneously within an educational setting. Because curriculum is a “process for transforming educational aims and practices” (p. 3), it requires inquiry and introspection.

Despite differing definitions and conceptions, a formal curriculum is implemented with the intention that learning occurs. In professional programs, there is a written plan that usually contains philosophical statements and goals; indicates some selection, organization, and sequencing of subject matter and learning experiences; and integrates evaluation of learning. These elements, among others, are addressed as aspects of the curriculum development process in subsequent chapters.

Nursing Curriculum as Evidence-Informed, Context-Relevant, and Unified

In this text, nursing curriculum is defined as the totality of the philosophical approaches, curriculum goals, overall design, courses, strategies to ignite learning, delivery methods, interactions, learning climate, evaluation methods, curriculum policies, and resources. The curriculum includes all matters that affect nursing students’ learning and progression and that are within the authority of the school of nursing. This conceptualization aligns with ideas of curriculum as a plan, experiences, process, means, strategy, and as being visible.

Evidence-Informed

A curriculum that is evidence-informed is based on systematically and purposefully gathered evidence about:

- The context in which the curriculum will be offered and graduates will practice nursing
- Students, learning, teaching, and nursing education
- Nursing practice
- Clients and their responses to health situations

The evidence that is gathered is then subject to the interpretation of curriculum developers. Plans are created, appraised according to the realities of the school of nursing, and then determined by the consensual judgment of nurse educators. As such, the curriculum is informed by evidence, but not based solely on evidence. Therefore, the term evidence-informed and not evidence-based is used.

An evidence-informed curriculum is dynamic, evolving as new evidence becomes available. Ongoing modification in response to new evidence ensures that the curriculum remains current.
Context-Relevant

A curriculum that is context-relevant is:

- Responsive to students; current and projected societal, health, and community situations; and current and projected imperatives of the nursing profession
- Consistent with the mission, philosophy, and goals of the educational institution and school of nursing
- Feasible within the realities of the school and community

This type of curriculum is defined by, and grounded in, the forces and circumstances that affect society, health care, education, recipients of nursing care, the nursing profession, and the educational institution. Although there will be significant similarities in the nursing curricula of many schools, those that are most strongly contextually relevant will have unique features reflective of local and/or regional circumstances. However, a context-relevant curriculum is not simply reactive to current circumstances; it is also grounded in projections about the future. As such, a context-relevant curriculum is forward looking and prepares graduates for current nursing practice and the type of nursing practice that could or should exist now and in the future.

Unified

A curriculum that is unified contains curricular components that are conceptually, logically, cohesively, and visibly related, specifically:

- Philosophical approaches, professional abilities, and curriculum concepts are evident in the curriculum goals or outcomes.
- Level and course learning goals or competencies are derived from the curriculum goals or outcomes.
- Course titles reflect the philosophical approaches and curriculum concepts.
- Strategies to ignite learning and opportunities for students to demonstrate learning are consistent with the curriculum goals or outcomes, and philosophical and educational approaches.
- The language of the philosophical approaches and curriculum concepts are used in written materials and teaching-learning interactions.

The cohesion and connections between and among all aspects of the curriculum are evident. This unity is apparent in written curriculum documents and the curriculum that is enacted daily.

In summary, a curriculum that is evidence-informed, context-relevant, and unified is grounded in evidence about nursing education, nursing practice, students, and society, and
is responsive to the situation in which it is offered. The curriculum is forward looking and organized in a coherent fashion with clear relationships among the curricular elements so that its unified nature is visible.

**Curriculum or Program?**

Although the term *nursing curriculum* is often used interchangeably with *nursing program*, the latter is broader in scope. The nursing program is defined as the nursing curriculum; the school of nursing culture; administrative operations of the school; faculty members’ complete teaching, research, and professional activities; the school’s relationships with other academic units, healthcare agencies, community agencies, and professional and accrediting organizations; institution-wide support services for students and faculty; and support for the school of nursing within and beyond the parent institution. In brief, the nursing program includes activities and relationships that influence the quality and nature of the student experience but extend beyond the student experience itself.

**CURRICULUM DEVELOPMENT IN NURSING EDUCATION**

*Curriculum development in nursing education* is a scholarly and creative process intended to produce an evidence-informed, context-relevant, unified nursing curriculum. The ultimate purpose is to create learning opportunities that will build students’ professional knowledge, skills, values, and identity so that graduates will practice nursing professionally and competently in changing social and healthcare environments, thereby contributing to the health and quality of life of those they serve.

Curriculum development is scholarly. It requires purposeful data gathering, logical thinking, careful analysis, presentation of cogent arguments, and precise writing. It is also creative, requiring openness to new ideas, imaginative thinking, and risk taking. The overall process is characterized by interaction, cooperation, change, and possibly conflict; comprised of overlapping, interactive, and iterative decision making; shaped by contextual realities and political timeliness; and influenced by the personal interests, styles, philosophies, judgments, and values of members of the curriculum development team.

The complex processes that lead to a substantial revision of an existing curriculum or creation of a new curriculum provide an opportunity for faculty members to expand their scholarly work, develop and implement fresh perspectives on the education of nursing students, and influence the culture of the school of nursing. Additionally, curriculum development provides an avenue to strengthen the school’s impact on the community and gain support from members of the educational institution, community, and nursing profession.
The curriculum development process has neither a beginning nor end. Once developed, the nursing curriculum undergoes refinements and modifications as it is implemented, researched, and evaluated, and as new evidence becomes available about teaching, learning, students, society, health, health care, nursing education, and nursing practice. A perfect nursing curriculum cannot be achieved and remain in place without alteration. Adjustments are required over time because of changing educational, social, and health care contexts and because nursing faculty strive to ensure that the curriculum is relevant to the context in which it is offered and in which graduates will practice nursing.

Although written and schematic representations of curriculum development are generally linear and sequential, this is not how nursing curricula are actually developed. Curriculum development is a recursive process, with each decision influencing concurrent and subsequent choices, and possibly leading to a rethinking of previous ideas. A cohesive nursing curriculum results from ongoing communication among groups working on different aspects of curriculum development, review and critique of completed work, and confirmation of decisions. According to Scales (1985):

In actual practice, development and implementation of the curriculum is an integrated phenomenon . . . developed in a very integrated and interrelating manner; one component . . . does not necessarily spring full grown and naturally from another, nor will any single component usually stand without some revision after subsequent parts are developed. (p. 3)

The iterative and recursive nature of curriculum work cannot be illustrated accurately in a two-dimensional representation. Depicting the multiple and repetitive interactions that occur between and among the individual elements of curriculum development would result in a crowded and confusing model. Therefore, like other authors before us, we present a model of the curriculum development process in nursing education that may appear linear and one-dimensional. However, chapter descriptions of each element of the model will make evident that the process is interactive.

The Model of Evidence-Informed, Context-Relevant, Unified Curriculum Development in Nursing Education depicts the overall process for nursing curriculum development and is illustrated in Figure 1-1. The model is multidimensional, with three core processes of curriculum work: faculty development, ongoing appraisal, and scholarship. These core processes permeate all activities leading to a sound curriculum. Included in the model are the specific activities of curriculum development, and feedback loops that
denote the dynamic nature of curriculum development, implementation, and evaluation. The model is applicable to all levels of nursing education and to all forms of curriculum delivery.

Core Processes of Curriculum Work

Faculty Development

Faculty development is necessary for all aspects of curriculum development because many nursing faculty and other stakeholders may have little or no preparation in educational theory. An evidence-informed, context-relevant, unified curriculum can result only when
those developing the curriculum understand the processes involved. Therefore, deliberate
and ongoing faculty development is essential to:

• Ensure that those engaged in curriculum development acquire the necessary knowl-
  edge and skills to contribute meaningfully to the processes and decisions of curriculum
  development
• Implement and evaluate the curriculum as intended

In addition, individuals’ openness to new ideas and methods is fundamental to curriculum
development, implementation, and evaluation. Their changing perspectives are indicative
of personal development and the intellectual growth of all members.

Ongoing Appraisal

Ongoing appraisal of all aspects of the processes and products of curriculum development
are inherent to the overall endeavor. Review and critique are necessary to ensure that:

• The processes in place are effective and satisfactory to members of the curriculum
development team.
• Completed work is consistent with the basic curriculum tenets and is of an appropriate
  quality.

Scholarship

Scholarship is a central activity of academia, and therefore, is a core activity of curriculum
development, implementation, and evaluation. This scholarship can include formal
research, expository or analytical publications, and presentations. Topics could include the
processes experienced, insights gained, and completed work. To engage in such activities
levitates curriculum work from a local activity to knowledge development and dissemina-
tion. In this way, the science of nursing education can be advanced.

Figure 1-2 is a model of the relationship of the three core processes to cur-
miculum work: curriculum development, implementation, and evaluation. The processes are foun-
dational to intellectual rigor in curriculum work.

Curriculum Development Activities

Determine the Need and Gain Support for Curriculum Development

When a decision is made to open a school of nursing or to introduce a new program within
an existing school, curriculum development is necessary. More typically, curriculum
development begins with an acknowledgment that the existing curriculum is no longer
working as effectively as desired. This recognition can arise from altered circumstances
within the school (e.g., changing faculty or student profile), or outside the school (e.g., changed nursing practice or accreditation standards).

Once there is an agreement to proceed with curriculum development, support is needed from nursing faculty, educational administrators, and other stakeholders (e.g., students, graduates, nursing leaders). Gaining support for the curriculum development enterprise includes describing the logical reasons for altering the curriculum and appealing to the values held collectively by members of the school and educational institution. Faculty members’ support and commitment are essential for all curriculum endeavors.
Additionally, administrative support (e.g., altered work assignments, secretarial assistance, promotion and tenure considerations) provides evidence of institutional encouragement for the initiative. Curriculum development is contingent upon adequate resources.

**Decide on the Curriculum Leader**

It is vital that a leader to guide the curriculum development process be determined. This individual can be appointed, elected, or given the position by consensus, according to the usual practices within a school of nursing. It is expected that the leader be knowledgeable about curriculum development, possess managerial skills to coordinate the logistics, and have the support of faculty and other stakeholders.

**Organize for Curriculum Development**

Attention to the logistical matters that will lead to a successful outcome is essential. Organizing for curriculum development requires consideration of, and decisions about leadership, the decision-making processes, committee structures and purposes, and approaches to getting the work done.

**Gather, Analyze, and Interpret Data About Internal and External Contextual Factors**

Systematic data gathering about the environment in which the curriculum will be implemented and in which graduates will practice nursing is critical to ensure that the curriculum is relevant to its context. Data are gathered about specific contextual factors and these are the forces, situations, and circumstances that exist both within and outside the educational institution and have the potential to influence the school and its curriculum. The contextual factors are interrelated, complex, and, at times, seamless and overlapping. Internal contextual factors exist within the school and the educational institution; external contextual factors originate outside the institution.

Typically, information is obtained about internal factors of history; philosophy, mission, and goals; culture; financial resources; programs and policies; and infrastructure. Similarly, data are gathered about the external contextual factors: demographics, culture, health care, professional standards and trends, technology, environment, and socio-politico-economics. It is necessary to determine precisely which data are required about each contextual factor, as well as the most appropriate data sources. The data are then analyzed and interpreted to deduce the core curriculum concepts and key professional abilities that graduates will need to practice nursing.

**Establish Philosophical and Educational Approaches**

Information about philosophical approaches used in, or suitable for nursing education, along with values and beliefs of the curriculum development team, lead to the development
of statements of philosophical approaches relevant for the school and curriculum. Reaching resolution about the philosophical approaches is a critical milestone in curriculum development, because all aspects of the finalized curriculum should be congruent with espoused values and beliefs and the concepts that form the philosophical approaches. Along with the philosophical approaches is the identification of educational approaches consistent with them.

Formulate Curriculum Goal or Outcome Statements

The curriculum goal or outcome statements reflect broad abilities of graduates, each focusing on professional practice and representing an integration of cognitive, psychomotor, and affective actions. Curriculum goal or outcome statements are written to incorporate the desired abilities of graduates, philosophical approaches, and core curriculum concepts. They are a public statement of what graduates will be like.

Design the Curriculum and Plan Curriculum Implementation and Evaluation

The term curriculum design refers to the configuration of the course of studies. In designing the curriculum, faculty and other members of the design team determine level goals or competencies; nursing, non-nursing, and elective courses; course sequencing; relationships between and among courses; delivery methods; and associated policies. Brief course descriptions and draft course goals or competencies are prepared for nursing courses. As the curriculum is being designed, plans for its implementation are discussed concurrently to assess whether the design is likely to be feasible and how a reconceptualized curriculum can be introduced as the current curriculum is being phased out. Implementation planning also includes such matters as informing stakeholders, attending to contractual agreements and logistics, and planning ongoing faculty development.

Curriculum evaluation is an organized and thoughtful appraisal of those elements central to the course of studies undertaken by students, and of graduates’ abilities. The aspects to be evaluated include the philosophical and educational approaches, curriculum goal or outcome statements, overall design, courses, strategies to ignite learning, interactions, learning climate, evaluation methods, curriculum policies, resources, and actual outcomes demonstrated by graduates. Like planning for implementation, planning curriculum evaluation should occur simultaneously with discussions about design.

Design Courses and Plan Course Implementation and Evaluation

Designing courses requires attention to the following components: purpose and description, course goals or competencies, strategies to ignite learning, concepts and content, classes,
guidelines for student learning activities, opportunities for students to demonstrate learning, and evaluation of student learning. Each course must be congruent with the curriculum intent and clearly relate to intended curriculum goals or outcomes. As a mirror of the process of designing the curriculum and planning curriculum implementation and evaluation, planning for course implementation and evaluation should occur concurrently with decision making about course design.

Implement the Curriculum and Conduct Ongoing Curriculum Evaluation and Refinement
Curriculum implementation begins when the first course is introduced and continues for the life of the curriculum. Successful implementation is dependent on faculty and student adoption of the curriculum tenets and the use of congruent educational approaches and methods to evaluate learning. The curriculum evaluation plan is put into action simultaneously with curriculum implementation. Ongoing evaluation results in small refinements that smooth implementation, fill identified gaps, and/or remove redundancies.

Evaluate the Curriculum
Once completely implemented, the entire curriculum is evaluated to determine whether all elements are appropriate and congruent with one another, and to ascertain graduates’ success. Internal curriculum evaluation is undertaken by members of the school of nursing, whereas external curriculum evaluation is generally conducted as a part of program evaluation by provincial, state, regional, or national approval or accrediting bodies.

Feedback Loops
The feedback loops in the model reflect the idea that at every stage of curriculum development, implementation, and evaluation, judgments are made about the appropriateness and fit of one element with previous elements, and the possibility of modification. The feedback loops signify that the curriculum is dynamic, subject to change as information about its effectiveness and appropriateness is gathered. Additionally, the feedback loops illustrate the connections among the curriculum development, implementation, and evaluation activities and the core curriculum processes, because the core processes permeate all aspects of curriculum work.

INTERPERSONAL DIMENSIONS OF CURRICULUM DEVELOPMENT
Curriculum development is not a sterile process of objective, detached decision making. Rather, it is marked by the dynamics of all interpersonal activities. Because each school of
nursing has a unique set of people with their own talents, personalities, goals, knowledge, experiences, and values, the culture and dynamics vary from school to school. In general, however, learning, conflict, cooperation, resistance, eagerness, formation of group alliances, power struggles, commitment to shared goals, sadness, and satisfaction can occur during curriculum development. The human dimension is a constant factor and must be attended to even when the tasks and deadlines of curriculum development are pressing. For curriculum development to be successful, it is important that all members of the curriculum development team feel valued and appreciated for ideas they offer and work they complete.

Curriculum deliberations occur in collaboration with colleagues whose values may be divergent. Because values affect perspectives and choices, they are a powerful (although sometimes unrecognized) influence on curriculum development. Consequently, it is incumbent upon curriculum developers to reflect on their ideals and beliefs, discuss them openly with colleagues, and consider how these influence their preferences about the developing curriculum. Clarification of individual and collective values is integral to curriculum development and can be essential in times of emotional debate or apparently irresolvable conflict.

The dynamics of influence and power are also part of curriculum development and its aftermath. Faculty members with either informal or formal power in the school may influence the process in directions not supported by all, and consequently, some faculty and other stakeholders might feel devalued, resentful, or powerless. New informal leaders can emerge during curriculum development with a resulting loss of influence by others. The processes of developing and implementing a new curriculum can lead to shifts in the power dynamics within and outside the school, with associated changes in the real or perceived advantages and disadvantages experienced by individuals.

Curriculum development and implementation represent a significant change for faculty members in which they progress from known and comfortable ways of being, to a state of uncertainty, and then to new understandings and practices. Collegial support and reinforcement sustain this progress. Collectively, faculty can create and institute strategies to recognize their progress, offer encouragement to each other, and celebrate their successes. In these ways, both faculty cohesion and the curriculum are strengthened.

A full description of the interpersonal dynamics of curriculum development is beyond the scope of this text. The interpersonal dimension is a matter that requires diligent attention in all curriculum work. The success of the curriculum is dependent on the dedication of all participants, and this is most likely to develop when individuals communicate openly and supportively with one another, feel valued, and believe their ideas are contributing to quality nursing education.
CHAPTER SUMMARY

Curriculum development in nursing is a scholarly and creative endeavour that faculty members and other participants undertake with the goal of preparing graduates who will practice nursing professionally in constantly changing environments. The nursing curriculum is comprised of the totality of the philosophical approaches, curriculum goals or outcomes, overall design, courses, strategies to ignite learning, delivery methods, interactions, learning climate, evaluation methods, curriculum policies, and resources, an inclusive definition that differs from those offered by other curriculum experts. The Model of Evidence-Informed, Context-Relevant, Unified Curriculum Development in Nursing Education describes a process for developing a curriculum that is informed by evidence, relevant for the context in which the curriculum will be offered and graduates will work, and unified conceptually. Core to the model are faculty development, ongoing appraisal, and scholarship. Curriculum development begins with the recognition that a new curriculum is needed and may seem to be complete when the newly created curriculum is implemented. However, development of an evidence-informed, context-relevant, unified curriculum is really a dynamic process, because evaluation and subsequent refinement are constant features of nursing curricula, even during implementation. Successful curriculum development, implementation, and evaluation are contingent on dedicated participants whose efforts are valued and who are supported during the process.

REFERENCES


CHAPTER 1 / Creation of an Evidence-Informed, Context-Relevant, Unified Curriculum


