



**University of
South Australia**

University of South Australia Graduation Address

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Let me begin by telling a true story. It is the story of how and when I knew that I wanted to be a nurse.

It all began at around age 14 when I was visiting an elderly relative – my great aunt – in a nursing home.

What I recall most about these visits was the way in which my great aunt, lying flat in her bed, was unable to move her hands or upper body to reach for a drink of water. Sitting by her bedside I was able to reach across and assist her with her drink. I brought the cup to her mouth and using a paper straw she could swallow what she needed. The cool water soothed her dry mouth. She could only just manage to say thank you. Connecting with her on such a fundamental, essential level, assisting her to be comfortable, felt 'right'. For me it was the beginning of knowing what I wanted in life.

I knew at that time I wanted to be working in nursing helping and supporting others – specifically in such a way that brought them real benefit. Through this experience with an elderly relative I knew that I wanted to be a nurse. I made up my mind that nothing was going

to stop me from making this a reality. Shortly after, I had secured my first job as a nurse assistant in an aged care facility. Clearly, I have come a long way in my career since that time.

The binding element between my experience as a teenager thirty five years ago and your experience as a UniSA nursing and health science graduate is our commitment to caring. And it is caring with a person-centred approach that matters most.

A person-centred approach¹ is concerned with human connectedness: the capacity for feelings to be received and understood, and lives to be revealed.

A person centred approach also aligns with a narrative approach. And a narrative approach illuminates the needs of the person with a physical or mental health condition, her or his family, carers and clinicians.

At the heart of a narrative approach is the art of storytelling.

Story telling² is a profoundly human capacity. Meaning is accomplished through an interaction between the teller and the listener. The listener enters into the world of narrator, constructs and helps in the telling of the story; thus a narrative is jointly accomplished, according to shared knowledge and interaction.

Such activity is central to the practice of nursing and healthcare.

The counterpoint to a narrative approach is application of a structured or mechanistic style of engagement and interaction. In such instances personhood is lost. Needs end up being impersonally processed, with little opportunity to contribute a perspective on what actually lies behind their situation.

¹ For further details about personhood in mental health care, see Procter, NG, Harmer, H, McGarry, D, Wilson, R, Froggatt, T. (2014) *Mental Health: A person-centred approach*. Melbourne: Cambridge University Press

² Michael, K. and Valach, L. (2011) The narrative interview with a suicidal patient. In K. Michael and D. Jobes (eds), *Building a Therapeutic Alliance with the Suicidal Patient* (pp. 63-80). Washington: American Psychiatric Association

Think for a moment about a person with a mental illness and in crisis, living in the community and requiring an urgent response. When someone with a mental illness is in crisis, they can be profoundly distressed or disturbed. Their sensory perceptions may be fragmented. They may be experiencing auditory and visual hallucinations. They may be withdrawn or deeply suspicious. As a result the person may believe that others – including health and social care professionals – may want to harm them. Their response may be one of self-protection.

The immediate challenge is to know how and when to move in new ways, to co-ordinate a service response, focusing specifically on safety, comfort respect and dignity.

Why is this important? Because the combination of such knowledge and skills create an atmosphere of trust, support and encouragement to reduce distress and bring about practices for the better.

Such an approach and deep understanding is at the heart of nursing and healthcare. And this is what you have been working towards. As graduates going forward, you are educated in both the art and science of healthcare.

As graduates, you also know the importance of taking stock of your own lives. You know the value of being open and flexible. You have a diverse skill set. You know what is needed to make a difference in the world. As a nurse entering the profession you know what you stand for, how you will work with others and how to support recovery with dignity.

As graduating health professionals what you say, do, think and feel can also be an expression of leadership. Why is this important? Because leaders, through their actions and personal influence, are well placed to bring about change. Leadership is, after all, about change, inspiration, motivation, and influence.

Effective leaders communicate respect and warmth, because warmth is a conduit to influence: it facilitates trust and the communication and absorption of ideas³. Prioritising warmth helps

³ Cuddy, A.J.C., Koht, M. and Neffinger, J. (2013) Connect, then lead. *Harvard Business Review*, July-August: 55-61

you connect immediately with those around you, demonstrating that you hear them, understand them, and can be trusted by them – now and in the future.

And all these things – and much more – occur all levels of the health care system. It is through you – the next generation of graduates – there is an opportunity for new and fresh leadership in health care.

I wish each and every one of you all the best and every success in your future careers. Go well and go far.