Learning Argentine Tango to Develop Nursing Student Empathy for Patients

Empathy and understanding of patients’ feelings about vulnerability and loss of control during an encounter with the health care system allows nurses to develop interventions that help patients cope with this particular stressor. Having the ability to empathize with patients’ loss of control during a hospitalization may be challenging for nursing students, especially if they have never experienced a hospitalization themselves. Developing simulation learning activities in which students can learn how to be empathetic toward patients is challenging because learning empathy is related to the affective domain (Singer & Lamm, 2009). The affective domain deals with receiving, responding, valuing, organizing, and characterizing emotions related to a given situation. Setting up a simulation in which students experience a loss of control and vulnerability can be difficult; however, this can be accomplished by the application of the Argentine Tango.

In the Argentine Tango, a dance developed in Argentina in the late 1800s, the follower relinquishes control of the dance to the leader while walking backward. Within the context of the music and the physical space available, the leader guides the follower in an improvised dance. Having the students learn the basics of the Argentine Tango as a follower emphasizes loss of control similar to what patients experience when they enter the hospital environment. With this experiential simulation activity, the objective was to have students become aware and acknowledge in written form their own feelings around loss of control.

Learning Activity

The duration of the activity is 30 to 45 minutes. Twenty students participated in this activity after clinical postconference. First, the faculty member guided students through a discussion of what patients may experience during a hospital stay and the role of the nurse in that experience.

After the discussion, students were paired as leader and follower partners. The followers and leaders were instructed to place their hands on each other’s shoulders. Both the leaders and followers were instructed to not provide any verbal guidance or feedback during the activity. For the first part of the activity, the followers mirrored the leaders while walking in a circle around the room. The leaders walked forward, and the followers walked backward. After 1½ minutes, the roles in the pair were reversed, and students then participated in a 5-minute debriefing on the experience. The students discussed how as followers, they usually looked at their leader’s feet to orient themselves and predict where and when to move.

For the second part of the activity, the students switched partners, and they were instructed to do the same activity but with the followers not looking at the leaders’ feet. During the 5-minute debriefing, the students verbalized the difficulty in not looking down. Students then were asked to switch partners for the last part of the activity, and the followers were asked to close their eyes while their leaders guided them around the room. The last debriefing took the form of a reflexive journal.

Student Response to Activity

For this last debriefing, students completed a reflexive journal entry (Silvia, Valerio, & Lorenza, 2013). Students noted that overall they enjoyed the activity because it gave them a new sense of awareness about the vulnerability and loss of control patients may feel when encountering the health care system. A few students stated that the uncertainty of what the leader would do made them feel fearful and anxious. The students noted that they understood how a nurse providing clear guidance and explaining to a patient regarding what to expect during a hospitalization would decrease some of the feelings of vulnerability and loss of control that some patients experience.

References


Martina R. Gallagher, PhD, MSN, RN
martina.r.gallagher@uth.tmc.edu
Janira A. Flint, BSN, RN
University of Texas Health Science Center at Houston

The authors have disclosed no potential conflicts of interest, financial or otherwise.

doi:10.3928/01484834-20160414-13