

REIMAGINING CURRICULUM IN NURSING EDUCATION: A NARRATIVE INQUIRY INTO CHANGE AND PROFESSIONAL EXPERIENCE

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Abstract

Curriculum is never static. It evolves and shifts with the people experiencing it. This study investigates curriculum making as a lived process that connects teachers and students through shared educational experiences. Drawing on Clandinin and Connelly's (1992) view of curriculum as lived experience, the inquiry explores how meaning and knowledge are constructed within a changing professional knowledge landscape in nursing education. Narrative inquiry was selected as the research methodology because it captures the temporal and storied aspects of human experience. It demonstrates how educators and students build identity, knowledge, and purpose through storytelling. The study explores the tensions between the envisioned curriculum design (what ought to happen) and what actually happens in classroom practice. The research was conducted in a baccalaureate nursing program at a small Canadian university that implemented significant curricular changes in response to evolving healthcare and educational needs. The research shows how identities, values, and relationships become part of curriculum work, shaping what counts as knowledge and what sometimes gets lost. Viewed this way, curriculum is less a product to be delivered and more a shared human practice, created through conversation, struggle, and care. The findings also demonstrate how personal, social, and institutional factors continuously shape nursing curricula. Through narrative accounts, the study highlights relationships among teachers, learners, subject matter, and context. These insights provide new perspectives on thinking of curriculum as a human and educational process that prepares nurses for an unpredictable and evolving professional world.

Keywords: *Nursing education, curriculum, pedagogy.*

1. Introduction

Nursing education often views curriculum as a product that can be planned, mapped, and delivered (Diekelmann, 1997). This perspective supports accountability and program consistency, but it often obscures how curriculum actually develops through human experience in classrooms. Educators and students do not simply implement a curriculum; they live it, negotiate it, and reinterpret its meaning through everyday interactions (Aoki, 1993; Clandinin & Connelly, 1992). When nursing programs undertake significant curriculum redesigns, the gap between what is documented in program plans and what actually happens in practice can grow larger. This paper contends that curriculum change in nursing education is best understood as curriculum making, a lived and relational process that unfolds over time within specific institutional and classroom contexts.

This argument draws on a narrative view of curriculum that emphasizes experience, identity, and relationship. Clandinin and Connelly (1992) described teachers and students as curriculum makers whose lives together in classrooms constitute curriculum as much as any formal plan. Curriculum, from this perspective, cannot be separated from instruction, nor can aims be separated from the means through which aims are pursued. Understanding curriculum reform, therefore, requires attention to both official redesign work and lived classroom experience. This paper presents a narrative inquiry account of curriculum making in a baccalaureate nursing program undergoing substantial redesign in response to changing professional and educational expectations.

2. Conceptual framework

This paper draws on narrative understandings of curriculum and the concept of professional knowledge landscapes. Narrative scholarship views experience as storied and context-dependent,

influenced by temporal continuity, social relationships, and place. Clandinin and Connelly (1992) argued that curriculum is not just a document or set of objectives. It also comprises the ongoing shaping of educational lives, including how teachers and students develop identities and meanings through their shared activities (Clandinin & Connelly, 1992; Connelly & Clandinin, 1988).

The concept of professional knowledge landscapes further clarifies the environment in which curriculum development occurs. Practice expectations, regulatory requirements, institutional policies, and disciplinary traditions shape nursing education. Educators operate within spaces where specific forms of knowledge are legitimized, such as meetings, committees, accreditation processes, and program documentation. Students and educators also engage in classrooms where learning occurs through interaction, uncertainty, and the personal histories students bring. These places do not simply coexist. They influence one another, often creating tensions between official reforms and the lived teaching and learning experience in the classroom.

3. Method

Narrative inquiry guided this study because it is well-suited to understanding how experience unfolds over time. It focuses on temporality, sociality, and place, aiming to make sense of lived experience rather than reducing it to specific variables (Clandinin, 2016; Clandinin & Connelly, 2000). The setting for this inquiry was a baccalaureate nursing program at a small Canadian university during a significant curriculum redesign. The narrative highlights the lived experience of curriculum development as educators balanced redesign work with teaching, and as students navigated learning and identity formation within the new context.

The narrative is structured through interconnected stories that illustrate how curriculum development is influenced by nested contexts. These include a broader reform story that presents curriculum change as urgent and necessary, an institutional story of redesign efforts that must adhere to formal requirements and timelines, and classroom stories that demonstrate what curriculum looks like in practice. The focus of analysis is not on judging whether the redesign was successful. Instead, it is on understanding how curriculum is formed through relationships, pressures, and choices across various contexts (Clandinin & Connelly, 1998; Connelly & Clandinin, 1990).

4. Findings

The research narrative illustrates how reform discourse can significantly influence curriculum work. Curriculum redesign is often framed in terms of improvement, emphasizing moral and professional responsibility. This language can motivate change, particularly for educators seeking to adapt nursing education to evolving practice environments. However, reform language can also become hard to challenge within institutional settings because it suggests inevitability. When reform language is normalized, educators may feel pressured to demonstrate confidence and clarity even when uncertainty persists. This can limit opportunities for meaningful inquiry into what reform truly means in practice.

Within institutional redesign efforts, the account tends to focus on highlighting intention. Program documentation, outcomes language, and curricular maps communicate desired goals and create a clear public narrative of alignment. This visible narrative supports institutional needs, including program approval and stakeholder communication. However, the paper shows that intention alone does not determine what occurs in classrooms. Educators also depend on practical strategies shaped by time constraints, staffing realities, and the unpredictable nature of teaching and learning. Strategic choices are often less visible in public accounts, but they are fundamental to how the curriculum is enacted and maintained.

A key finding is that curriculum development involves continuously linking goals and methods amid changing conditions. Educators may start with a clear idea of what they hope the curriculum will achieve. However, they must also adapt to emerging classroom realities, student needs, and institutional constraints. These adaptations are not just about implementation; they embody curriculum work in its lived experience. The account indicates that the most significant curriculum decisions often happen in moments not documented in program files, such as how an educator rethinks a learning activity when students struggle, how students interpret expectations through their personal histories, and how classroom relationships shape engagement and understanding.

The classroom stories in this account depict students as active contributors to curriculum-making rather than passive recipients. Students build professional identities as they interpret course content, navigate expectations, and connect learning with their practice aspirations. Their experiences show variation in how the same planned curriculum is adopted, resisted, or reshaped. The account demonstrates that externally defined curriculum can overlook important aspects of learning when it views students as

endpoints of design rather than as individuals who create knowledge and identity through experience. This inquiry also highlights the need for a third space: a deliberately created safe environment for reflective practice, where educators can step back from immediate tasks, examine assumptions, and craft new meanings through telling, retelling, and reliving experiences.

5. Discussion

This narrative inquiry account supports viewing curriculum change as a lived, relational process. It challenges the idea that curriculum redesign can be understood mainly through planned structures and stated outcomes. While formal curriculum documents are important, they do not fully represent the curriculum that students and educators experience. This gap is not a planning failure but a natural part of educational life. Jackson (1990) argued that educational research must focus on classroom reality rather than on intentions or prescribed methods. Narrative inquiry further suggests that this reality is storied, meaning-laden, and shaped by relational and temporal aspects of experience (Clandinin & Connelly, 2000).

The account also aligns with Dewey's (1938) claim that educational ideals do not eliminate the practical problems of teaching. They generate new problems that must be worked out through experience (Dewey, 1938). In nursing education, reform ideals often promote integration, competency development, and responsiveness to complex practice environments. These ideals can be worthwhile, but they do not serve as a complete guide for action in real classrooms. Educators must interpret ideals in context, negotiate trade-offs, and make ethical and pedagogical choices under constraints. Understanding curriculum change, therefore, requires attention to both the public language of reform and the private and classroom work through which reform becomes real.

This paper's analytic contribution highlights a recurring tension between intentional design and strategic enactment. Educators and institutions often present curriculum work as a linear process from vision to implementation. The narrative suggests a more accurate picture: curriculum making is iterative, involving ongoing adjustments, negotiations, and relationship-based judgments. Recognizing this reality can help reduce unrealistic expectations of seamless implementation and support more thoughtful leadership of curriculum change.

6. Implications for nursing education

A narrative perspective on curriculum change has significant implications for nursing education leaders and faculty. First, efforts to redesign curricula should allow space for inquiry alongside accountability. When institutional narratives demand certainty, educators may become less able to identify tensions that influence teaching and learning. Second, curriculum evaluation should include attention to lived classroom experiences. Program outcomes and maps offer useful information, but they do not show how students experience learning, identity formation, and belonging within a curriculum. Third, faculty development for curriculum change should help educators connect goals to practical methods in context. This includes supporting educators in navigating uncertainty, interpreting reform objectives realistically, and considering relationships as a vital part of curriculum work. Finally, nursing programs should resist the urge to treat curriculum as a deliverable that can be completed and then maintained. The curriculum is continually shaped by human practice, and maintaining its quality requires ongoing attention to how it is lived.

7. Conclusion

This paper presents a narrative inquiry into curriculum making in nursing education during a major curriculum redesign. The thesis is that the curriculum is not merely a formal plan; it is also the lived experience of educators and students, whose identities, values, and relationships shape what is recognized as knowledge and how learning becomes meaningful. The findings indicate that curriculum change develops within nested contexts, including reform discourse, institutional redesign efforts, and classroom life. Therefore, understanding curriculum reform requires attention to both intention and strategy, as well as the stories through which educators and students experience the curriculum. A narrative perspective on curriculum making offers nursing education a way to lead change that is realistic, relational, and attentive to the human elements of teaching and learning.

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