

# Whose curriculum is it anyway?

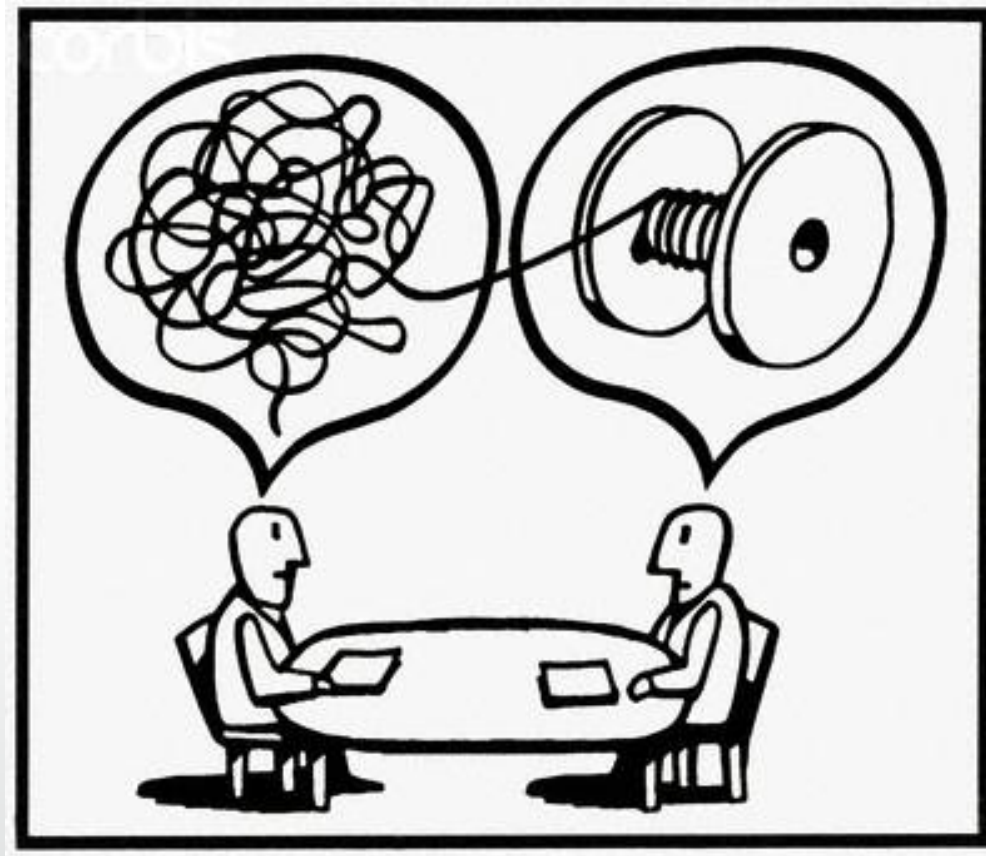
Julie Wintrup, Marcus Burton  
and Kelly Wakefield

25/2/14

...and just what is  
'the curriculum'?



...and who defines it?



*Sally Kift says it's:*

the **totality** of the student experience of, and engagement with, their programme of study....

... including **all of the academic, social and support aspects** of the student experience, & focuses on the “**educational conditions in which we place students**” (Tinto, 2009, 2), & includes the **CO-curricula opportunities** offered (outside the formal curriculum) with which students are encouraged to engage (Kift & Field, 2009)





..the **totality** of the student experience  
of, and engagement with, their  
programme of study....

....who is responsible for the ‘totality’ of  
the student experience...?







- ... including all of the **academic, social and support** aspects of the student experience...
- It could be you...

- & focuses on the “educational conditions in which we place students” (Tinto, 2009, 2)
- & includes the **co-curricula opportunities** offered (outside the formal curriculum) with which students are encouraged to engage (Kift & Field, 2009)







# The curriculum is..

“...what is taught, how it is taught, and how learning is assessed” (James 2002, p.81)

and the linkages between those three facets in the unit and course design are **made explicit** to students

in learning environments that take account of the contemporary realities of our students’ higher education context.

Kift & Field, 2009

# Why students as co-designers?

# NUS:

## **“Involving students in curriculum design**

Using students' feedback and representation should be key ways to shape the development of the curriculum.

It is also possible to look at this activity as a project in itself and there are some great examples of students designing particular modules, assessment methods and sharing in the delivery of programmes”

# Here are some of those great examples..

- Digichamps – Southampton
- Sheffield: Against Value module, winner of HEA Student/Staff partnership award
- Global Health module: Southampton
- Newcastle: Peer mentoring ..... etc

## *Institutional approaches:*

- Students as change agents: Exeter, now Winchester
- Student as Producer: Lincoln



Reasons why students as co-designers is productive and exciting...

# Global health module



**Profile** Sabu Padmadass

## A global outlook

**As Co-Director of the Centre for Global Health, Population, Poverty and Policy, Dr Sabu Padmadass is currently managing several international research projects. He also teaches a number of demography and statistics modules including 'Population and Health'. In 2015 he received a Vice-Chancellor's Teaching Award, having been nominated by some of his students. When the Voice went up with him, he had just returned from a month in China, working on a UN-funded project.**

**Q What projects are you working on at the moment?**

**A** Since 2013 I have been involved in evaluating reproductive health intervention programmes in China, which is funded by the United Nations Population Fund (UNFPA) with the aim of removing birth stagnation and promoting informed choices. I have recently completed the final evaluation. I'm also working with a large global network of researchers on a project funded by the UK Economic and Social Research Council (ESRC), looking at healthcare inequalities in Brazil and India.

**Q You are leading an interdisciplinary team to develop a new module as part of the Curriculum Innovation Programme (CIP). How did the idea for the Global Health module come about?**

**A** I was teaching a module called Population and Health and student representatives from Medicine wanted an opportunity to study this area as well as part of their interdisciplinary programme. At the time, their option to study global health was to go to London or Bristol. I got together a team of very enthusiastic colleagues and we realised that there was a need to develop a new module for a wider student community. In particular, Dr Julia Wilson from Health Sciences has been incredibly positive in facilitating student staff interaction.

Professor Alan Hill, currently based in our Faculty, is also involved with the design of the module. He felt that what they already offered at the end of a different course discussions and that we were

heading in the right direction. It is even encouraged us to produce an academic textbook on the subject, which is something we plan to do in the future.

Although we had already started the conversation about designing something new, it has been great to continue to work with the support of the CIP.

**Q What will the Global Health module involve for the students who take it?**

**A** They will gain a unique opportunity to learn 2D dimensions of global health, which is under-recognized and debated in many ways. They will study areas such as the role of society and technology in health promotion, the provision of dietary patterns and global burden of disease, disease as well as the spread of infectious diseases in a global context. The expertise and resources available to them through a group of research active teachers from Social and Human Sciences will be a major strength. The Vice-Chancellor will also be involved in teaching a session on health promotion and policy as part of the module.

One of the criteria for CIP modules is that they should make use of innovative delivery and assessment tools. Students studying Global Health will experience interactive lectures and workshops, tutorials, internet research and webinars, as well as taking part in online assessment.

**Q What do you think about the Curriculum Innovation Programme?**

**A** The CIP gives us a wide range of flexible opportunities for education and research. It is a safe space initiative, which is long overdue. There are a lot of interdependencies and overlap around the world knowledge, in terms of resources. The CIP attempts to address this and enable students to seek for knowledge horizons that meet new challenges. We want them to open windows to the outside world and prepare them for the global society in which they live. Thus, about preparing our future leaders.

**Q What achievements are you most proud of in your career?**

**A** Building an international research network with colleagues from China, India, Brazil, South Africa and some other African countries has not been easy, but I am proud that we have managed to build a strong team and a vibrant, fruitful academic collaboration. It is a pleasure and we are always looking for opportunities to apply for research grants. In the past 10 years that we have been involved with most of our applications have been successful.

I am also proud of my six PhD students, who have completed their doctorates. They are all well-placed, with good jobs and strong academic interests. One in particular came to me as a second-year undergraduate student attending one of my modules, he told me that through his reading he had identified an area that was under-researched and he wanted to research it himself. Through a PhD he went on to complete his masters and then his PhD, and is now working at the University of Bristol. Knowing that my lecture stimulated new thinking for research is highly motivating.

**Q If you hadn't followed an academic career, what would you have done?**

**A** I love films, so I think I would have done something creative in the film industry. I have a long list of favourite films and at times I try to pick one or two, it is impossible to choose one over the others.

**Q What are you currently reading?**

**A** The Chinese Century by Matt Ridley. The Chinese Century by Omid Safa.

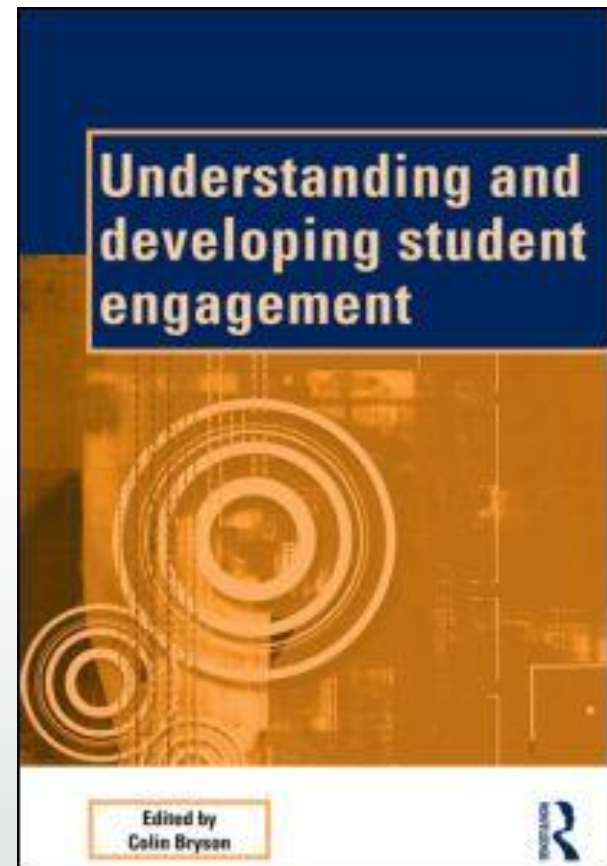
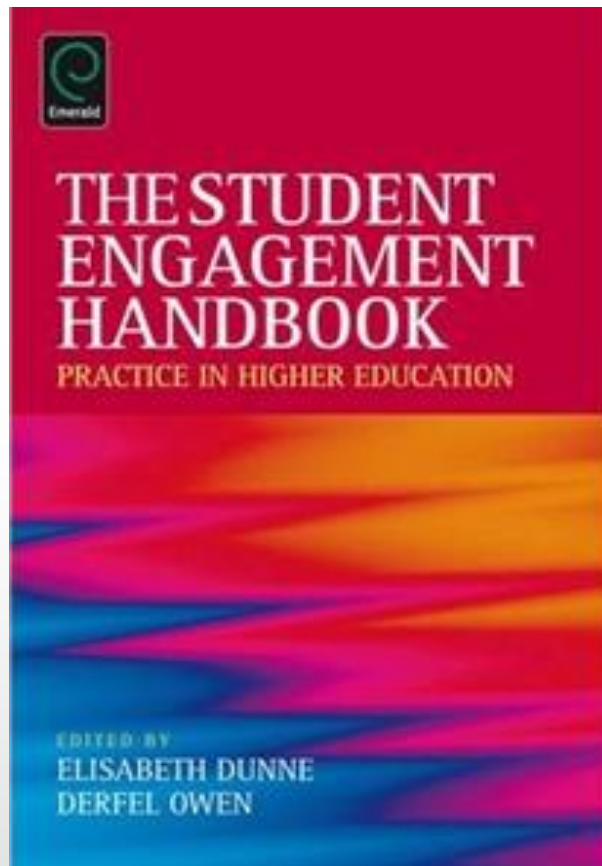
**Q And finally, who would be your ideal dinner party guests, dead or alive?**

**A** Sigmund Freud, Aristotle, Darwin, Florence Nightingale, Franz Kafka, Tony Blair and Ashwini Bha. Caring is another of my passions, so I think I would invite people to cook their interesting dishes.

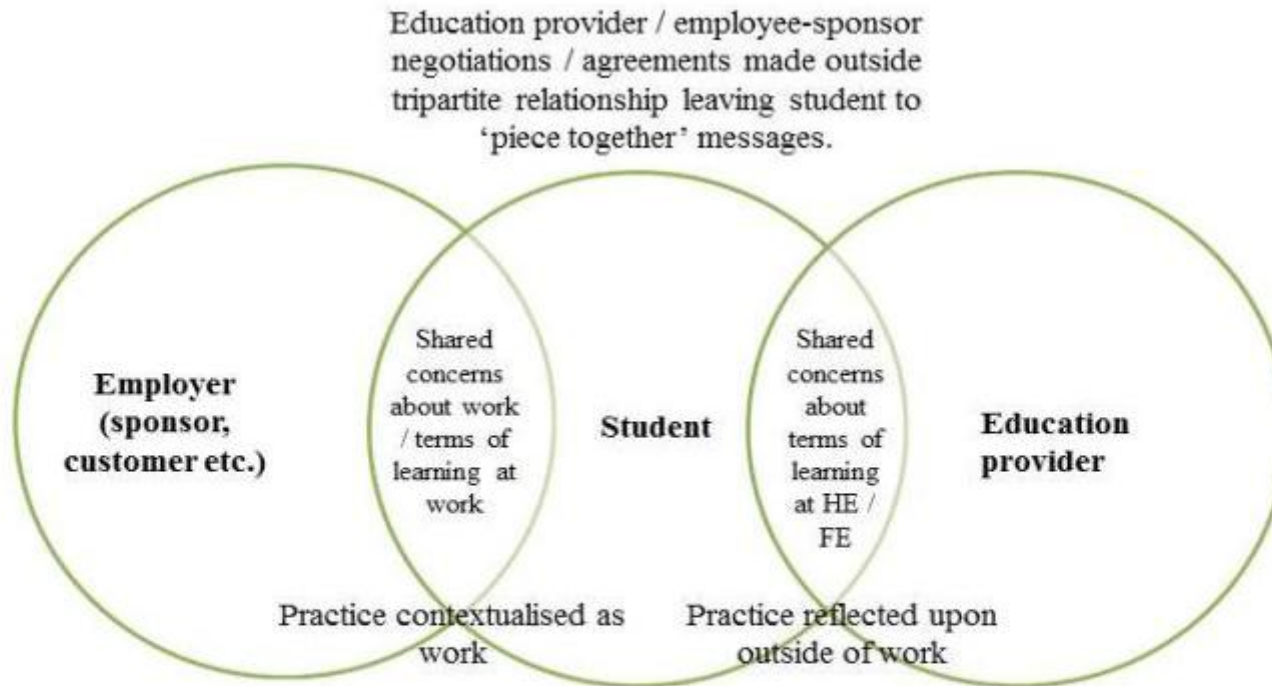
Find out more about the Curriculum Innovation Programme by visiting [www.soton.ac.uk/cip](http://www.soton.ac.uk/cip)

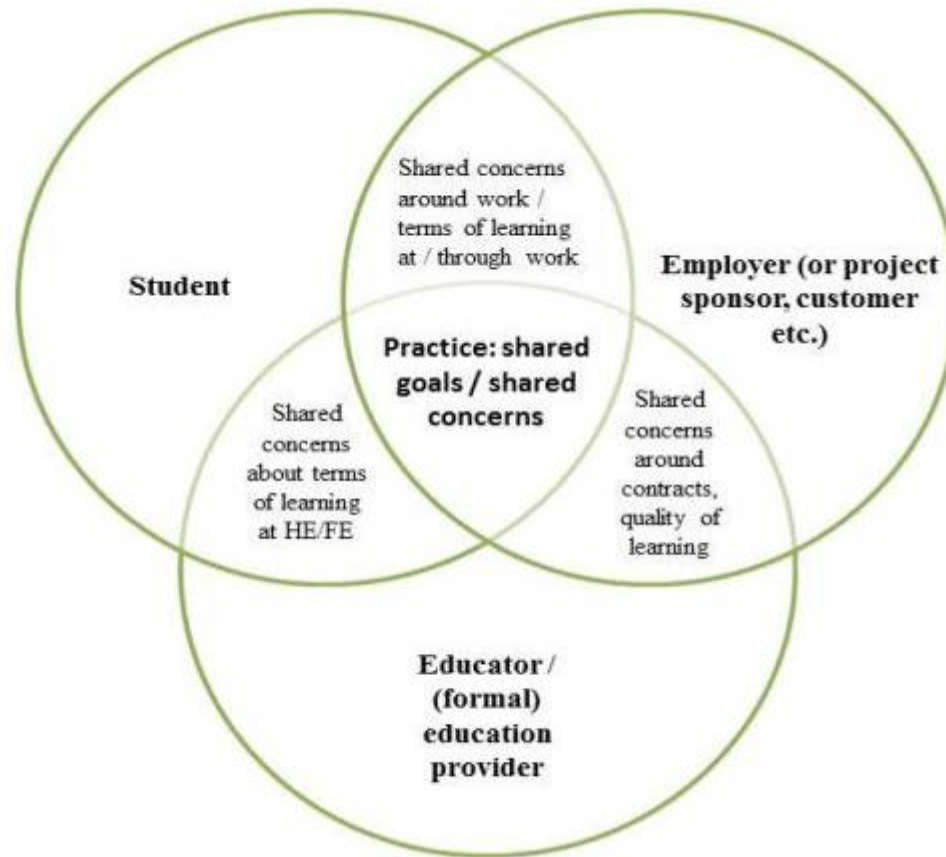
- ‘..it’s about our future, not your past...’

- Presentations at SRHE 2011; RAISE, 2011/12/13









# Students as co-researchers, presenters..

- **Improving student satisfaction with assessment and feedback – one day conference 27 February 2014 ...DClinP students on work and education pedagogy**
- **SRHE 2010...medical & OT student**
- **RAISE 2011, 2012, 2013..CI students, med students..**
- **Transition funded research project/s**
- **Students as authors, tweeters and bloggers**

# The Withdrawal of Treatment

Lucy Elisabeth James

## Abstract

The withdrawal of treatment is one of the most emotionally challenging and ethically complex aspects of end-of-life care. As our ability to prolong life progresses, the necessity to address issues such as the withdrawal of treatment increases in parallel. This paper approaches the subject from an ethical point of view and aims to establish the utility of ethical frameworks in the 21st century. To achieve this, the withdrawal of treatment is outlined and the arguments both for and against this topic are considered. Ethical frameworks are summarised and applied to the *Airedale NHS Trust v. Bland* [1993] case. The article argues that through asking ethical questions, one seems not to shed light on the matter, but only emphasises its complexity. In conclusion, although a traditional ethical framework may be applied to the issue of the withdrawal of treatment, multiple criticisms accentuate its impracticality and irrelevance in the modern medical world.

## Introduction

In my first year of University a close friend of mine was involved in a critical accident. He remained on life support for the following six months before physicians decided that the most appropriate action to take would be to withdraw support. The burdensome experience taught me that end-of-life care, and in particular the withdrawal of treatment, is a challenging issue both emotionally and intellectually. As an aspiring medic, it became a topic that I was keen to explore, and after enrolling on 'Ethics in a Complex World' (a Curriculum Innovations module that is part of Flexible Learning at the University of Southampton), I was provided with the perfect opportunity in which to do so.

In healthcare, four moral principles are used in the analysis of medical ethics: autonomy, beneficence, non-maleficence and distributive justice (Picard & Lee, 2013). Autonomy is defined as a rule that states patients must have a right to control what happens to their bodies, and these decisions must be respected by everyone. The second principle, beneficence, is an action that should

be performed for the benefit of others, thus all healthcare providers must strive to do the most good for the patient. Non-maleficence is one of the principal precepts of medical ethics and involves healthcare providers avoiding causing harm to their patients in every situation. Lastly, justice states that the doctor should try to be as fair as possible when offering treatments to patients and allocating scarce medical resources. The doctor must also be capable of justifying these actions (Winter & Cohen, 1999). These values (which are neutral between competing religious, cultural, and ethical theories) are able to be shared by everyone. However, the principles do not provide a method for choosing and fail to provide answers as to how to handle a particular situation. The four principles simply offer a common set of moral commitments (Gillon, 1994). In order to address this problem, this paper will enquire whether long established ethical approaches, such as consequentialism and deontology, are more appropriate when dealing with the issue of the withdrawal of treatment. To achieve this, the withdrawal of treatment will be outlined and the arguments both for and against this topic shall be considered.

Ethical frameworks will be studied, and are applied to the *Airedale NHS Trust v. Bland* [1993] case study.

## The withdrawal of treatment

The withdrawal of life-sustaining treatment with the deliberate intention of causing death to another provides a definition for passive euthanasia (Keown, 2004). In ethical and medical literature these terms are often used interchangeably; however for the purpose of this paper the 'withdrawal of treatment' shall

### **Airedale NHS Trust v. Bland [1993] case study**

In 1989 Tony Bland was injured in the Hillsborough disaster and this left him in a persistent vegetative state (PVS). Months later, Bland's physician expressed an intention to withdraw all treatment. This proposal was met with warning however from the coroner and police who stated that such action would constitute murder. Despite this, Bland's parents agreed with the physician; in short, they felt there was no benefit to Bland in keeping him alive. It was three years later that the Airedale Hospital Trust made an application to the High Court. Attracting considerable interest, the case eventually concluded; in 1993 treatment was withdrawn and Bland died nine days later.

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### Key words:

Withdrawal of treatment;  
Consequentialism; Deontology;  
Ethics



# Students blogging..

## Life at Health Sciences

Home Undergraduate Postgraduate Academic/Research About Health Sciences

### Lauren: Making a positive contribution to the NHS intervention service

17  
FEB



00

So the New Year is well and truly underway proving that time really does fly when you're having fun! I can honestly say that my final year emerging role placement is ticking all the right boxes so far.

I am now in week six of 10 and working with a busy, but very supportive, team of mental health practitioners, most of whom are nurses or social workers by background now practicing in generic roles. The team also includes psychiatrists, a clinical psychologist and my supervisor who is a band seven team lead and occupational therapist by background.

### Every Interaction Counts

By Students turning the corner  
October 5, 2013 //

I wrote this whilst thinking about how awful it must be to be stuck lying in a hospital bed for days on end, and what it must feel like. The patient, the nurse and the situation are all fictional.

"Ever since I woke up, after remembering with a sinking bed where I am (still in hospital, day 3 after my operation), I've been lying in this funny hospital bed. They are a very strange design, the way they are adjustable, but in all the wrong places, so that you are either sat up too high, or you have slipped all the way down to the bottom of the bed with your feet sticking out the end and your body bent in half uncomfortably somewhere in the stomach region. I'm only young in relative terms, and normally I'd have no trouble re-positioning myself, but following my operation I've been finding it hard to do by myself.

I'm in a fair amount of pain following my hysterectomy, but I really don't want to bother the nurses as they seem so busy - they have been running around the ward like crazy all morning, and I'm sure they've got more important things to do than attend to my pain, when I'm sure there are others far worse off than me.

I really am seriously starting to feel uncomfortable though after a while, what with this awkward bed that I just can't seem to adjust right, and my abdomen feeling like it's on fire. Unfortunately there's a little old lady at the far end of the ward who seems a bit disoriented, who keeps trying to get out of bed unaided, and the nurses are scared she's going to fall and hurt herself, so I keep quiet for now.

But then one of the young-looking nurses happens to glance my way and what she sees the slight wrinkle on my face, or my uncomfortable position, or both. Either way, she comes over, and her far-away distracted look evaporates as she walks towards me. She smiles a genuinely warm smile, like I am a favoured aunt or a friend, and enquires gently if I am alright. I nod slowly and tell her I'm fine - after all, I'm an independent woman in my normal life, and it's totally ridiculous that I don't seem to be able to get myself comfortable. I'm mortified at my inability to perform the most basic movement by myself, and I certainly don't want a young girl like her knowing that I'm struggling. She'd think me pathetic.

I expect to see relief on her face that I supposedly don't need anything, so that she can rush off and carry on with all her other jobs. But she pauses, looking into my eyes - she's not looked - and asks me quietly if I would like a hand with anything, perhaps with being made more comfortable? I am totally overwhelmed with gratitude. I never would have asked her myself for help, but I feel I can accept it if it's offered to me, especially in the way she asks me - not forcing help on me if I don't want it, but showing willing if I would like it. For a few seconds, I feel on the verge of tears, this tiny gesture of help has totally broken through the solid wall I'd built, convincing myself that I'm fine and that my situation isn't that bad. Suddenly, I'm overwhelmed by how vulnerable I feel, having had my basic functions stripped from me, my dignity thrown out the window in this silly hospital gown, my sense of womanhood destroyed by the operation, my very identity totally changed. I thought I was fine - but actually I'm really, really not.

# Students storifying...

The screenshot shows the Storify website interface. At the top, there's a header with the Storify logo (by livefyre), a search bar, and buttons for 'Create Story' and 'RAISEnetwork'. On the left side, there's a vertical 'Feedback' button. The main content area displays a collection of tweets. The first tweet is from Els Freshwater (@blacksladder) dated 6:38 PM - 23 Jan 2014, mentioning 'Leadership at the Sharp End' and #newNHSleaders. The second tweet is from Julie Wintrup (@juliewintrup) dated 10:50 AM - 23 Jan 2014, mentioning @therese\_jackson and #newNHSleaders. On the right side, there's a 'Don't miss' section with four featured stories: 'Darlington signs sponsor for Nationwide race', 'How to Keep Your Hardwood Floor Looking Great', '2014 AJLI Winter Leadership Conference', and 'PartnerWorld Leadership Conference 2014'. At the bottom, there's a footer with social media links (Facebook Like, Twitter Follow @storify), a follower count (131K followers), and a navigation menu (Report Abuse, VIP, Guided tour, About, Help, Blog, Jobs, Tools, API, Terms, Privacy, © 2014 Storify).

Is this all a bit comfortable?

# Students as commentators, critics...



Chloe Green, University of Southampton, 2010: 'I want real change'  
[http://news.bbc.co.uk/1/hi/uk\\_politics/election\\_2010/8644380.stm](http://news.bbc.co.uk/1/hi/uk_politics/election_2010/8644380.stm)

# Sheffield 'Against Value' module

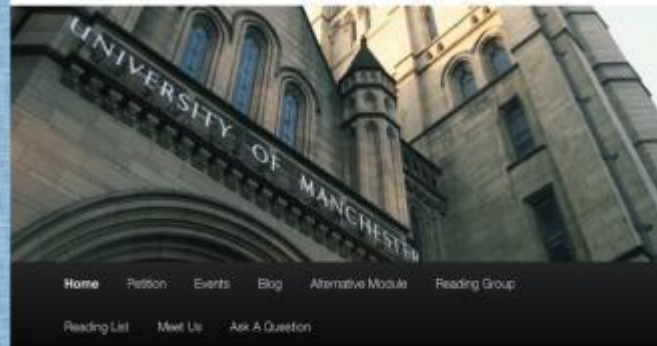
- *“When was the last time anyone in a University attended meetings with representation from every level of academic expertise from first- year undergraduate to Professor, with everyone committed to improving the university education?”*
- Student Ambassadors for Learning and Teaching: Matthew Holman, Lucy Tallentire, Rebecca Foster, Christopher Thompson, Hannah Donkin, Jade Phillamore, Eden Summers
- *Winners of HEA Student and Staff partnership Award 2013*

## Post-Crash Economics

The world has changed, the syllabus hasn't – is it time to do something about it?

Search

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### The Post-crash Economics Society

**We are The Post-Crash Economics Society and we are a group of economics students at The University of Manchester who believe that the content of the economics syllabus and the way it is taught could and should be seriously rethought.**

We were inspired to start this society when we heard about a Bank of England Conference called 'Are Economics Graduates Fit for Purpose?' At this event leading economists from the public and private sphere came together to discuss whether economics undergraduates were being taught the right things in the light of the 2008 Financial Crisis. This chimed with some of our frustrations about the economics we were learning and so we decided to set up a society that would through doing research, organising events and running workshops seek to bring this discussion to Manchester. That was at the start of the 2012/13 academic year.

As of today we have a fully-fledged society, a book club, an incredibly successful launch event led by world class economists, many student and academic supporters, a petition that is constantly gaining signatures, links with a national network of economic societies and organisation and even more passion and determination to change the current state of economic education!

However, this is just the start. We will ensure that this society will become a permanent fixture on the Manchester economics landscape in the years to come, forever seeking to provoke discussion between students and staff about what economics is, what it should be and how it should be taught.

#### Society Constitution

1) The Post-Crash Economics Society has been set up to try and broaden the range of perspectives and the teaching methods used by the Manchester Economics Department.

2) We will run a campaign to build student support and engage in dialogue with the economics department.

3) We will run events, workshops and other activities.

4) We will be an equality and diversity friendly society and will strive to be an inclusive and welcoming environment for all.

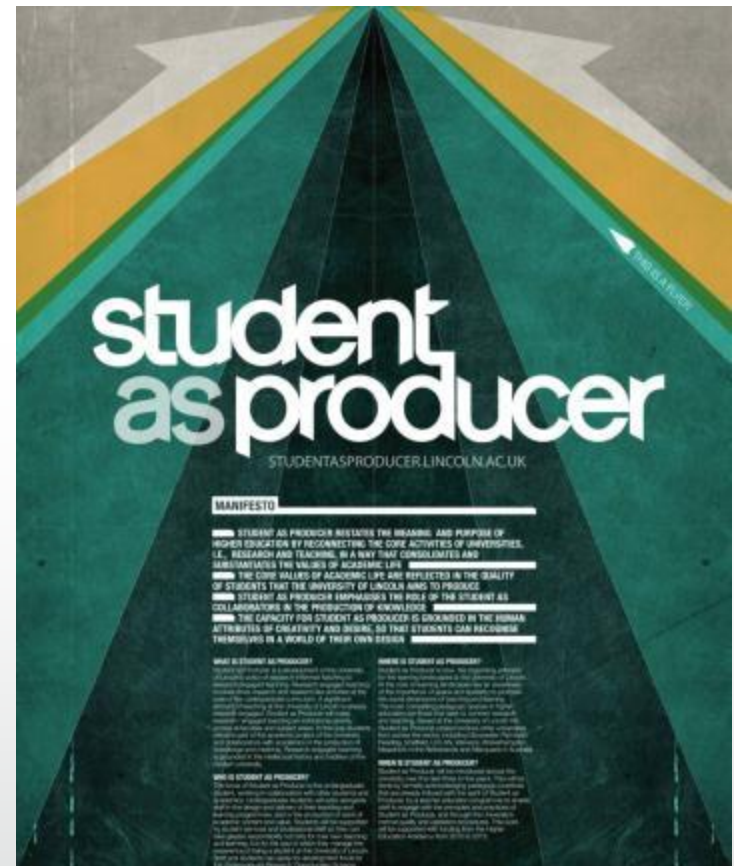


- "We have spent enough time condemning consumerism in education, and now we need to articulate the alternative. Student engagement is a great concept but it needs to be deployed to radical ends. Students as partners is not just a nice-to-have, I believe it has the potential to help bring about **social and educational transformation**, as long as we know what we are trying to do and we maintain a critical attitude about the ways the concept is adopted and used. ...
- An activity really should make the reality of education closer to our vision before we single it out as “best practice.”
- (*Rachel Wenstone VP HE NUS, 2012*)



## Rethinking the values of higher education - students as change agents?

By Professor Janice Kay (Senior DVC, Education),  
Elisabeth Dunne (Head of Project Development, Education Enhancement)  
and James Hutchinson (CEO, Students' Guild), University of Exeter



## Neary on **Student as Producer**:

- is not simply about teaching and learning, but asks fundamental questions.... promoting ‘the idea of the university’, as a radical political project.
- is derived from a critique of ‘academic capitalism’ and is an act of resistance to the concept of student as consumer.
- is aware that a free university is only possible in a free society; otherwise it’s a reading room in a prison  
(After the Fall: Communiques from Occupied California 2009).
- critiques the managerialist and business logic which has become the commonsensical language and hegemonic discourse of higher education.

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26th February 2013, 11:05am

## Lincoln commended for giving students a voice

The University of Lincoln has been commended for the innovative way in which it gives students a voice in shaping how they learn.

The Quality Assurance Agency for Higher Education (QAA) awarded a commendation to the University for its enhancement of student learning opportunities.

The innovative Student as Producer project was highlighted by the QAA as the framework around which learning is systematically enhanced across the University. This commendation forms part of a QAA report which was published this week (25 February 2013) following an institutional review visit in November 2012.

Professor Mike Neary, Dean of Teaching and Learning at the University of Lincoln, said: "It's great to get this commendation. It's an official recognition of the dynamic institutional environment that has been created to support student learning. The commendation validates our claim to be sector leading in teaching and learning."

The HEA-funded Student as Producer initiative aims to reconnect universities' core activities of teaching and research by encouraging students at all levels to view themselves as active producers of knowledge, rather than passive consumers. It is now the organising principle of teaching and learning across the University of Lincoln, among other things giving undergraduates opportunities to



Students at the University of Lincoln

# Institutional approach

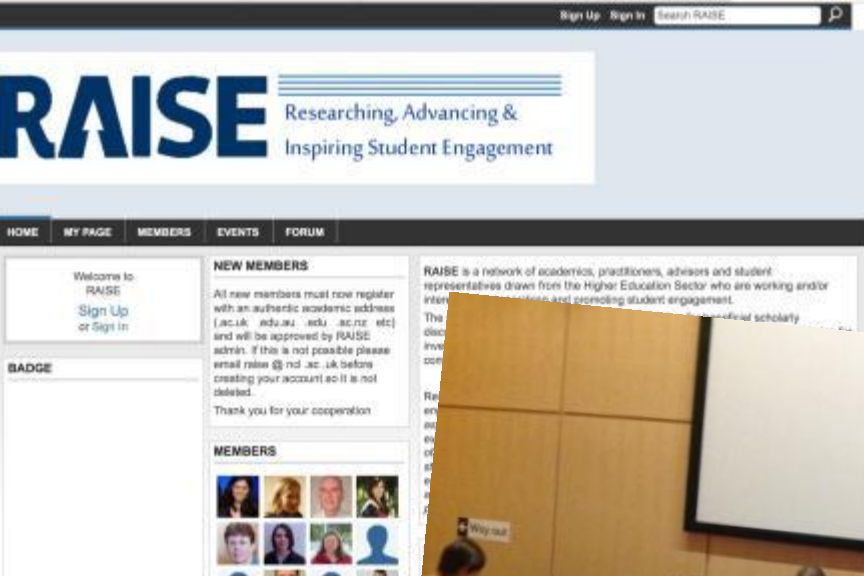
*Kift on cultural and systemic change:* It is an ambitious goal that will only be met when **all student facing activities** performed by academic, administrative and support programs are **fully coordinated, aligned with student needs and integrated into the curriculum** as much as possible. As McInnis (2003, p.13) puts it “bridging the gaps between academic, administrative and support programs [is] a substantial challenge for many universities”

Nelson & Kift, 2005

*Neary on institutional approach:* This whole institutional approach needs to be based on a **vision of teaching and learning that is shared across the institution** (Sabri 2011).

Neary, 2014







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- <http://raise-network.ning.com/> **Conference September 11<sup>th</sup>/12<sup>th</sup>, 2014, MMU.**

Thank you!