

HUMAN SUSTAINABILITY: COLLABORATIVE LEARNING FOR HEALTH AND WELLBEING IN THE ACADEMY

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Abstract

This roundtable will help educators develop a holistic focus on their mental, physical, and spiritual well-being to engage fully with learners (hooks, 1994). Faculty affected by the global pandemic and stressors of academia took control of their work-life balance crucial to human sustainability (Sheared, 2019). Researcher One participated in a diabetes prevention program, experienced improved health and overall well-being, then used a community education model to share her learning with colleagues. The researchers are exploring their informal self-directed learning process using Prochaska and DiClemente's (1982) transtheoretical model, Lave and Wenger's (1991) community of practice, and Kolb's (1984) experiential learning model.

Keywords: Human sustainability, transtheoretical model, community of practice, experiential learning, learning for health and well being

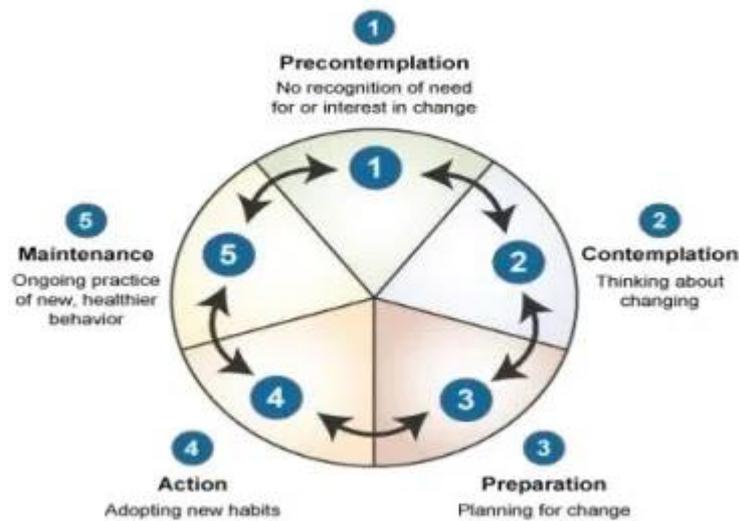
Higher and adult education needs a focus on human sustainability (Sheared, 2019) for educators. hooks (1994) argued that educators need to be self-actualized to empower their learners and that if educators are not whole, mentally, physically, and spiritually, they cannot meet their learners' needs or facilitate their empowerment. hooks (1994) describes this as "engaged pedagogy" (p. 15).

This roundtable will help educators focus more holistically on mental, physical, and spiritual well-being to engage fully with learners (hooks, 1994). These faculty affected by the global pandemic and stressors of academia – increasing isolation, weight gain, lack of physical exercise, health issues, high stress, etc. – took control of their work-life balance crucial to human sustainability (Sheared, 2019). Researcher One participated in a diabetes prevention program, experienced improved health and overall well-being, then used a community education model to share her learning with colleagues. The researchers are exploring their informal self-directed learning process using Prochaska and DiClemente's (1982) transtheoretical model, Kolb's (1984) experiential learning model, and Lave and Wenger's (1991) community of practice.

Transtheoretical Model of Health Behaviour Change

Prochaska and DiClemente's Transtheoretical Model of Health Behaviour Change seeks to increase the success of healthy behaviours (e.g., eating healthy, smoking cessation). Recognizing that behaviour is frequently tied to thoughts and beliefs, the transtheoretical model incorporates both psychological and behavioural factors to create change in six sequential stages.

“Stages of change” Transtheoretical model of behaviour change



Prochaska, DiClemente & Norcross (1992)

Figure 1: Stages of change: Transtheoretical model of behaviour change

Retrieved from: <https://pmhealthnp.com/pmhnnp-topics/transtheoretical-model/>

The process begins with Precontemplation, with individuals considering behavioural changes but not planning action. In Contemplation, individuals plan to take action towards behaviour change within six months. Individuals are exploring behavioural pros and cons and beginning to understand their behaviour's negative consequences. During Preparation, individuals make plans to take action in the immediate future. In the Action stage, individuals make significant changes in behaviour. The Maintenance stage starts when behaviour changes have begun, and the individual is working to prevent relapse. This model acknowledges relapse will happen and prepares individuals to accept it as a temporary setback and continue moving forward. At the Termination stage, the individual has successfully changed their behaviour and no longer engages in unhealthy behaviours. They can cope with relapse temptation and experience little anxiety or stress regarding previous unhealthy behaviour.

Experiential Learning

The role of life experience in adult learning is a commonly accepted tenet of many adult education theories. According to Kolb (1984), "learning is the process whereby knowledge is created through the transformation of experience" (p. 38). Kolb's model requires learners to 1) engage in new experiences, 2) reflect on experience from multiple perspectives, 3) integrate new experiences and reflections into theories, and 4) use new theories in decision-making and problem solving.

As adults, we have accumulated a significant amount of experience with health behaviours resulting in healthy or unhealthy outcomes. For those needing lifestyle changes that support healthy outcomes, experiential learning can support those changes. Participating in lifestyle change programs offers a new experience. Reflecting in a community of practice allows for multiple perspectives on new and past experiences related to habits, ideas, and understanding of healthy living. New approaches to improving and maintaining health may emerge, along with opportunities to apply them to daily choices. A sustained

program provides iterative experiential learning processes, with opportunities to experiment with healthy behaviour practices and lifestyle habits serving individual needs and contexts.

Communities of Practice

Lave and Wenger's (1991) communities of practice (COP) views all learning as happening in a context. Such learning involves "the whole person rather than 'receiving' a body of factual knowledge about the world;...activity in and with the world, and...the view that agent, activity, and the world mutually constitute each other" (Lave & Wenger, 1991, p. 33). COP focuses on engagement and relationships as the site of learning. This results in "emphasis on connecting issues of sociocultural transformation with the changing relations between newcomers and old-timers in...a changing shared practice" (p. 49).

Learning to reclaim and practice a healthful life requires examining sociocultural contexts supporting or inhibiting individual and community health. This can include cultural/familial attitudes and beliefs, and social norms around food, activity, and health. It can also include examining professional and workplace expectations in conflict with improving and maintaining personal health, such as those commonly found in academic careers.

Questions for Reflection

The authors invite reflection on self-care and overall well-being in the academy through these questions:

1. How is your work/life balance during COVID and in general?
2. How is self-care a site of resistance for you?
3. What do you think about the mind-body-spirit connection?
4. What adult learning theories are useful lenses for understanding your overall well-being?

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