Creative Learning: The Mandala as Teaching Exercise

Margaret Cole Marshall, MS, APRN, BC

ABSTRACT

Faculty committed to undergraduate education have discovered the need to address teaching strategies that focus on the new generation of students. In teaching an undergraduate course on Nursing the Client with a Mental Illness, the affective domain of learning is used to develop interpersonal competence, self-awareness, and self-reflection. The teaching technique used is an experiential exercise that asks students to create group mandalas using art materials on circular pieces of butcher-block paper.

The mandala concept is derived from the Buddhist tradition and means “circle” or “center” in Sanskrit. Carl Jung introduced this technique to the United States and incorporated it into his therapy. As a creative, active learning strategy, the mandalas helped the faculty meet the clinical objectives for the course and the learning needs of a new generation of students. They also helped students learn about Eastern philosophy, group process, self-awareness, and Jungian therapy.

Faculty in undergraduate education are finding the need to address teaching strategies that focus on students’ learning styles, technological expertise, and critical thinking abilities. Three domains of learning—cognitive, psychomotor, and affective—are used in undergraduate education, but the primary focus is often on the cognitive domain, which involves the transmission of didactic information. The psychomotor domain includes physical skill acquisition, and the affective domain is concerned with the emotional component of learning (Valiga & Bruderle, 1997).

In the undergraduate course in psychiatric nursing at the author’s institution, the affective domain has a high priority, focusing on developing interpersonal competence. This includes interviewing skills, self-awareness, and self-reflection, all of which are part of the affective domain of learning. This article describes the teaching strategy of the mandala experiential exercise, which exposes students to other cultures (i.e., Eastern and Western philosophy), group process, self-awareness, psychiatric theorists (i.e., Carl Jung and Hildegard Peplau), verbal and nonverbal behaviors, and spirituality.

Theoretical Orientation for the Mandala

The undergraduate psychiatric health course, Nursing the Client with a Mental Illness, mirrors the school of nursing’s philosophy toward its undergraduate baccalaureate program and is based on Hildegard Peplau’s interpersonal relations model. Peplau viewed psychiatric nursing as a significant interpersonal process between nurses’ therapeutic use of self and individuals, their families, and their communities. An important part of the interpersonal interaction is nurses’ self-knowledge, which promotes problem solving and personal growth for both nurses and clients (Peplau, 1952).

Peplau’s framework, the Interpersonal Model for Nurses, guided the implementation of the mandala teaching strategy. Her model views behavior as related to social or interpersonal experiences and as helping clients by a corrective interpersonal experience. Peplau believed nurses’ self-awareness and experiences of their own growth and self-discovery were important in helping others (Stuart & Laraia, 2001).

Interpersonal competence is more than simply interviewing skills. It also involves verbal and nonverbal communication skills; personal awareness; self-understanding; differentiation, which helps in knowing one’s boundaries; and spirituality, which is an awareness of one’s meaning in life. The technique incorporates critical thinking skills, such as reflection and questioning, and leads to personal openness, making interpersonal competence a developmental process.

Groups are perhaps the most potent media through which to develop self-awareness (Burnard, 1986). The undergraduate programs at the
author's institution emphasize critical
cal thinking (i.e., reflective and rea-
sonable thinking directed toward ade-
quate and appropriate decision
making) (Valiga & Bruderle, 1997).
Faculty determined that strategies
that promote and guide students in
critical thinking include:
• A questioning attitude of open-
ness.
• Evaluation of one's own think-
ing.
Faculty considered strategies that
would couple critical thinking strate-
gies with focused, group-process
strategies. Both would strengthen
students' affective learning domains
and be reinforced in the clinical appli-
cations for psychiatric mental health
concepts. Therefore, faculty imple-
mented and evaluated the mandala
teaching strategy.

The Mandala
Mandalas are traditions in the
Buddhist religion. Buddhist monks
develop intricate designs with colored
sand in a circle, as prescribed by their
holy book. After spending weeks on
these designs, the monks dispose of
them in rivers to demonstrate the
fragile nature of life. Mandalas are
part of the monks' Buddhist medita-
tion, and they see them as reflections
of their own spiritual journeys (Pilgrim, 1989).

Carl Jung, a Swiss psychoanalyst,
traveled around the world and spent
time in Tibet, where he observed
monks creating mandalas (Hopcke,
1999). Jung brought the idea with
him to the United States, adapting
the technique and incorporating it
into his therapeutic theories. Jung
found that the experience of making a
mandala using various art materials
helped him and his patients gain self-
awareness and insight. The symbols
of individual (or group) experience
are demonstrated in mandalas and
are seen as magic circles that help
individuals grow (Fincher, 1991).

Other Western therapists, such as
Joan Kellogg and Judith Cornell
(1994), developed the mandala idea
as a therapeutic and artistic tool.
Kellogg, an art therapist, believes a
mandala "can be used as a valid path
in its own right, as a vehicle to self
discovery" (Fincher, 1991, p. 24).
"When we create a mandala, we make
a [group] symbol that reveals who we
are at the moment" (Tucci, 1961, p.
177), and Cornell (1994) sees the
mandala as a reflection of our place
in life, showing us our own inner
processes.

The Mandala Process
To achieve the course objectives
of self-awareness, critical thinking, and
process, faculty used the cre-
ation of mandalas as a teaching strat-
A large, circular piece of butcher-
block paper, measuring approxi-
ately 4 feet in diameter, was placed on
a table with markers, crayons, colored
pencils, tape, glue, miscellaneous art
materials, and commercial maga-
azines. Clinical groups of 7 to 10 stu-
dents were each assigned to an indi-
vidual table and told they had 1 1/2
hours to define themselves as a
group, any way they would like, and
that they would not be graded on the
exercise.

The exercise was performed first
at the beginning of the 16-week
semester, when students did not
know each other, and then again at
the end of the semester. The two
mandalas were then compared and
discussed as part of the group devel-

opment process.

While students were creating their
mandalas, the faculty observed the
students, noting:
• Who in the group took the lead.
• Who spoke and who was quiet.
• Who decided how the mandala
should be created.
• Who participated.
• Any conflicts or themes that
emerged.

Faculty used this information at
the completion of the mandala to dis-
cuss group process and how groups
work. At the end of the second man-
dala exercise, faculty asked the stu-
dents to reflect on the process and
describe what happened. All of
the students then examined the pictures
the groups put on their mandalas,
describing what each picture signi-

Relationship of the Mandala
Strategy to Course Objectives
Three of the course objectives
directly addressed and accomplished
through the mandala exercise were:
• Use the therapeutic process to
develop self-awareness.
• Demonstrate specific commu-
nication skills, which help foster and
maintain therapeutic relationships
with clients with mental illnesses.
• Demonstrate accountability for
one's own behavior in implementa-
tion of nursing care.

Students were evaluated on four
specific objectives addressed in the
mandala exercise:
• Examination of the effects
of students' verbal and nonverbal
behaviors on others.
• Examination of the effects
of others' behaviors on themselves and
others.
• Assessment of their own
strengths and the areas in which they
can improve.
• Recognition of their own limita-
tions.

These evaluations allowed stu-
dents to begin to make changes
where necessary.

Evaluation
Three methods were used to evalu-
ate the teaching strategy. First, as an
objective approach to the process, fac-
culty retained an individual from the
university's Learning Resources
Division to observe the mandala
process and its relationship to course
objectives. Second, as a subjective
approach to the product, the students

created another mandala, then evaluated both how they met the specified course objectives and how they perceived their growth in the mandala exercise, group process, and self-awareness. Third, student evaluations included answers to a series of questions addressing the extent to which they learned, as a result of creating the mandalas. The questions asked them to describe the lessons they learned about:

- Themselves.
- Their groups.
- Group process.
- Verbal and nonverbal communication.
- Another culture.
- Spirituality.

Through written responses to these questions and reflections on their own learning, students evaluated the mandala as a teaching strategy that clearly helped them meet course objectives and facilitate the group process within the classroom setting. After creating the second mandala at the end of the semester, students compared the differences between the first and second mandalas and discussed how those changes reflected themselves and their groups. The mandalas prompted them to engage in reflections of both their own behaviors and those of others and to assess both their personal strengths and the areas in which they needed improvement.

Using the mandala as a creative, active learning strategy helped students meet objectives for the course and helped faculty meet the learning needs of a new generation of students.

References