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Collaborative story development across the creative arts and nursing: reflections on a practice-based filmmaking research project

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ABSTRACT

This article describes an interdisciplinary creative collaboration between a group of academic researchers from the creative arts and nursing education, along with professional actors, who co-created a series of short film scenarios for pedagogic impact. The scenarios were intended to improve the experiences of nursing students on placement by supporting nurse educators to experiment with a transformative learning praxis in their pre- and post-placement interactions with students. This work addresses the process of collaborative content creation, which was undertaken through a method comprising character and story development drawn from screenwriting, improvisation and (Creative) Participatory Action Research. Beyond influencing nursing pedagogy, we suggest this approach has useful implications for creative practice disciplines more broadly, and the application of story development scenarios across a range of academic contexts for pedagogic impact.

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Creative participatory action research; clinical teaching; improvisation; scenarios; scriptwriting; transformational learning

Introduction

This article describes an interdisciplinary creative collaboration between a group of researchers from the creative arts and nursing education, along with professional actors, who co-created a series of short film scenarios for pedagogic impact. The scenarios were intended to improve the experiences of nursing students and their supporting registered nurse educators in clinical learning experiences, by inviting a select group of the supporting nurse educators to experiment with a Transformative Learning (TL) praxis (McAllister 2012, 2015; McAllister et al. 2013). Here we outline the process used in this collaboration, reflecting on how techniques of character and story development, improvisation and (Creative) Participatory Action Research (from here, CrPAR) were used, and how they resulted in an innovative form of story development for research purposes. Our intention is that by documenting and sharing the process of developing and producing these scenarios, a model for creating subject – and theory-authentic scenarios might be

valuable to other disciplines, particularly where complex and multifaceted ideas need to be embedded in student learning tools and approaches.

We include a selection of first-person reflective extracts that were captured during and after the creative process, told from the various disciplinary lenses of the team and interwoven with their wider contexts of the use of creative scenarios for pedagogic purposes, as a way of emulating the iterative nature of the project and – importantly – the impact of the project on the extant practices of the researchers.

Starting positions

Sometimes I have filmed myself as expert with nursing students in acting roles for learning and teaching purposes. What happens is that the nursing skills principles may be preserved, but authenticity is lost because of the nuances of scriptwriting, writing scenarios for video recording and the benefits of working with professional film crews. The realism of character interactions, back stories, personalities and stumbles and subtleties, that can be highlighted through scriptwriting and writing scenarios for video recording are overlooked. (Ryan)

The starting point for our project was an extant research study in which authors Ryan, Batty and McAllister sought to design and evaluate a professional development opportunity to introduce nurse educators to adult learning theories, more specifically John (Jack) Mezirow's (2000) theory of Transformative Learning (TL). Central to TL is the idea that facilitated active learning, scholarly discussion and critical reflection will support learners to discover new meanings, which enables them to shift existing perspectives or habits of mind. For this project, the primary learners were nurse educators – the end users of the scenarios; however, the student actors playing the subjects of the scenarios, and the researchers themselves, emerged as secondary learners from the project, as a direct result of the creative participatory methodology used (see below).

McAllister has written extensively on TL in relation to nursing education (McAllister 2012, 2015; McAllister et al. 2011, 2014). McAllister et al. (2013) and also developed and evaluated the STAR model, reportedly the only published approach to introducing health professionals such as nurse educators to learning how to use TL in their teaching (Enkhtur and Yamamoto 2017). STAR is an acronym for:

S – sensitise learners to a relevant concept, using engaging trigger material such as film, story, case study, poetry or artwork;

TA – have the learners take action, by including immersive activities so learners put new knowledge into action, and thus deepen their application of the concept in practice; and

R – reflect, prompts learners to evaluate their experiences and continuously use reflective practice.

STAR is useful for introducing health educators to breaking down a lesson plan in order that a significant health issue or problem can be conveyed to students in ways that pique their curiosity and concern, allow them the opportunity to examine pre-existing assumptions and social and political issues impacting healthcare practice, and engage in new ways of thinking and problem solving to empower them as active change-makers. Using visual trigger material is one way to stimulate learners when teaching with TL (McAllister et al. 2016), and thus the idea for stimulating nurse educators to learn TL in

the extant project was to develop a series of vignettes depicting long-standing evidence-based problems that nurse educators experience when preparing students for, and supporting them to succeed, in clinical learning experiences/work-integrated learning. The intention was to depict opportunities for student learning that could be realised through the application of TL by nurse educators and to encourage discussion amongst nurse educators and academics about pedagogy. The ultimate aim is to challenge learners' assumptions and perceptions and in doing so enlarge students' capacity to work to the highest end of their scope of health practice, to be empathic, effective, and professional.

In this new project, which came to include researcher-practitioners from filmmaking and screenwriting, the desire was to include deeper levels of creative practice that might extend the STAR model and inspire educators within and outside of nursing to consider the creation of their own pedagogic materials and scenarios. As such, to be engaging and dynamic for the learners – nursing educators in the first instance and following that the nursing students they support – we believed that from an early point the vignettes conceptualised for the new project should be developed in a creative, responsive, and authentic way, not just scripted and then filmed (see below for literature on this method). This was important to the idea that TL is an embodied pedagogy. Its use and implementation are enacted in a form that goes beyond the written and exceeds the illustrative.

Specific strategies needed to be employed to engage and support nurse educators to reflect on their current approaches to clinical teaching and to stimulate them to think about new ways to approach their teaching. These scenarios were always intended to be created and doing this through a multidisciplinary research process – rather than simply bringing in a writer for hire – led to an expansion of the team, from nursing academics with expertise in clinical teaching (Ryan and McAllister), to include (Batty) an expert in script and story development, and (Cattoni), an expert in collaborative and participatory filmmaking. Cattoni also has a former career as a nurse academic, including working in the role of nurse educator, so this brought an added layer of content authenticity to the creative process.

Mapping the scene

A review of the literature in two specific areas – scenarios as method, and collaborative story and script development – explains how we arrived at our Creative Participatory Action Research (CrPAR) approach. As outlined above, it was important for the research team – especially because of its interdisciplinary make-up – to discover a way of developing scenarios that would feel authentic to the subject matter. More importantly, the blend of the team and the use of diverse methods resulted in querying the confines of extant professional development pedagogies.

Scenario as method

Vignettes have been used to address a myriad of questions across a wide range of scientific fields and professional disciplines for many decades. Most relevant to this research is the literature on the use of vignettes in education (Baudson and Preckel 2013); particularly

how nursing and health care use film and video vignettes to offer and bring about the possibility of a shift in perspective through teaching and learning (e.g. Archibald et al. 2021; Archibald and Blines 2021; McAllister et al. 2016). A vignette, or as we refer to them, a film scenario, is a brief, carefully written, depicted and presented description of a person or situation, designed to simulate key features of a real-world scenario (e.g. Atzmüller & Steiner, 2010; Evans et al. 2015; Gould 1996; Schoenberg and Ravdal 2000). Film scenarios are useful in nursing and medical education for examining healthcare professionals' attitudes, perceptions, and beliefs (e.g. Hughes and Huby 2002), quality of care in outpatient settings (e.g. Peabody et al. 2000), and general practitioners' decision making (e.g. Wainwright et al. 2010).

Hughes and Huby's (2002) review of vignettes in nursing cautioned difficulties in constructing vignettes to ensure they have relevant meaning for the audience. The manipulation of content and style, for example, must be carefully managed alongside the contextual aspects of the scenario (Who is it for? What is its purpose?), with the aim to provide an authentic viewer experience (Shackelton et al. 2009). In this project, the additional layer of Transformational Learning as a pedagogic theory through which the scenarios were to be experienced by the eventual workshop participants, meant that while content and style could be experimented with, they could not undermine the scenarios' core purpose and audience. In this way, expert attention to story and script development – particularly that which is research-informed (see Batty, Sawtell, and Taylor 2016) – is imperative.

Collaborative story and script development

The conventional process for scripted content creation goes through a number of standard processes that begin with the development phase. This process involves defining the project in a literal way through written descriptions of characters, narrative, locations, and the story world. The final screenplay becomes a 'blueprint' for the remaining phases of production as well as a legal procurement document for investors. Success when moving from the signed-off script into a filmed production depends on a well-written script, strong acting performances, and directorial talent. This all comes together in the single time and place of the film shoot, an intense and pressured environment. When script problems occur on set, it can be difficult and expensive to manoeuvre and solve them, hence the use of formulaic, risk-averse, and hierarchical frameworks for mainstream content production (see Batty et al. 2018).

While there are variations to conventional script development in other cultural contexts, for example the highly collaborative approach adopted in Nigeria's Nollywood (Oguamanam 2020), most departures from conventional script development in the West are ensconced in lower-budget, lower-risk independent cinema developed by, amongst others, UK director Mike Leigh, US directors Sean Baker and Chloe Zhou, and in Australia most notably Matt Cormack and Sophie Hyde. Hyde and McCormack's film *52 Tuesdays* (2013) was filmed every Tuesday over a one-year period, adopting a 'staggered writing' approach where the script was developed and refined during each sequential week of filming (Dooley 2014). With a long shoot period (52 weeks) and collaboration between cast and crew, including a flexible approach to directing, this scheduling approach made staggered writing possible. Other key characteristics of alternative

approaches to conventional script-to-production processes include using actors along with non-actors playing versions of themselves; collaborative scripting with actors and relevant others including experts in the field; the use of improvisation to inform scripting and performance; responding to a thematic purpose in script content; and mining for realism through filming a situation rather than a highly charged, dramatic incident (Murphy 2019). The filmic outcomes of these approaches are characterised by authentic performances and a capacity to address complex human issues for audiences.¹ Approaches such as these were considered suitable for this project, specifically regarding the active outcomes of TL that help learners understand how to challenge the status quo, and examine any pre-existing mindsets they may possess given the likely diverse range of patients and conditions they will encounter in their professional role/s.

The approach we thus took with the project is similar to that described by Dooley (2014) and Murphy (2019): Cattoni was familiar with the actors and Ryan and Batty spent time with the actors before filming; actors brought parts of themselves to the characters; we linked collaborative filmmaking as a heuristic tool with improvisation; situations were filmed rather than high-cost scripted dramatic scenes, to explore thematic topics relevant to nursing education. This approach led to nuanced insight into topics that were intended for more peripheral and personal interest to nurse educators, who are experienced in the field and could thus relate to the more subtle aspects of nurse-patient interactions. Where such collaborative filmmaking is valuable for gathering more granular and specific details, it also opens up the possibility of a much more creative force within a research collaboration. Here the possibility of participatory action research arises, where filmic techniques, deliberate scenario building, interpersonal collaboration, and ad hoc improvisation are brought to bear on the methodological terrain of creative practice-based action research (e.g. Cox et al. 2021).

Creative participatory action research

Participatory Action Research (PAR) is one of several action research approaches. Action research has long been used in education and research for practitioners to continually improve their practice. Cycles of action and reflection are implemented, intended to reflect and challenge current actions and make changes to future actions, thus impacting the status quo and improving practice (Norton 2018). Participatory Action Research emerged when scholars began to argue that participatory processes were central to the practice of doing research to impact change (Kemmis and McTaggart 2005; Reason and Bradbury 2008). The literature is resplendent with examples showing the approach is favoured for impacting change to practice, policy and professional development interventions. Transformative Learning Theory (Mezirow 2000) and STAR (McAllister et al. 2013) also align with the use of PAR in the field of higher education and more specifically nursing education. The participatory dimension of PAR refers to the active engagement between researchers working together and reflecting on ways of improving the situations in which they find themselves. With our project, additional participatory aspects occurred with the acting students creating their characters.

Bringing in a creative practice approach to research (see Batty and Kerrigan 2018; Skains 2018), which was very familiar to researchers Batty and Cattoni, allowed a dynamic and responsive approach to content creation. Researchers Ryan and McAllister

had seen this kind of work presented in various fora and they had themselves used extant creative texts in some of their previous research (e.g. in film analysis workshops), but implicating creative methods that produce creative artefacts was novel. Tying these two approaches together, then – Participatory Action Research in the form of iterative cycles of content development; and Creative Practice in the form of the development of creative artefacts (filmed scenarios) – the team arrived at the method, Creative Participatory Action Research (CrPAR). In this way, health educator team members could take part in and learn about creative practice, and vice versa, creative arts researchers could do the same with health education.

Plotting the script

Drawing together CrPAR, TL and STAR, the project team set upon a course to use appropriate tools, frameworks, and concepts. This was achieved using insights from team members' respective disciplines to develop a scenario-building method that would not only serve the core aims of the original research project, referred to in the Introduction, but that could also contribute new ways of 'thinking through practice' for academics across any discipline wanting to develop film scenarios to teach students hard to grasp and new concepts.

Scriptwriting had begun when Ryan, McAllister and Batty were writing the grant application for the project. Ryan and McAllister had written a series of creative stories highlighting concepts or teaching moments that, when considered from a different perspective, might benefit nurse educators in their work with students. The first was around orientating students to the learning environment; key to setting students up to succeed (Ryan and McAllister 2019). Orientation is often a missed learning opportunity for commencing a respectful adult learning relationship between students and educators that allows for critical scholarly discussions and agreed-upon methods for interrupting students' erroneous practices (McAllister, Tower, and Walker 2007). Little preparation for encountering unexpected learning experiences (Ryan et al. 2017), such as patient experiences that are abject or horrifying, can lead to students feeling overwhelmed and helpless and may result in nursing students withdrawing from their studies (McAllister and Brien 2020) and this informed the second story, which deals with a student encountering an overwhelming experience. The third related to the key nursing concept of an identified need for students to learn how to communicate in effective ways, particularly with people who are different to themselves, such as the older client (McAllister et al. 2021). Another component of students' clinical learning is learning how to terminate relationships with educators and patients on completion of clinical learning (McAllister 2008), and this underpinned the fourth story.

After Cattoni was commissioned as the filmmaker, she proposed the team adopt a collaborative scripting approach based on her experiences creating authentic content in several remote Indigenous communities (Indigenous Community Television 2016, 2018). She had worked with higher education acting students and alumni and thought she could find actors interested and willing to work with the researchers to create the scenarios in this way. The process she proposed mirrored some aspects of the collaborative script and story development discussed earlier. For example, the

actors would be working with broad scene outlines that addressed the thematic needs of Ryan and McAllister's research as opposed to scripts, be involved in the character and story development, and make use of improvisation to generate dialogue and character actions. Another important criterion for actor recruitment was an openness to having their performances guided by the research team (Ryan, Batty) rather than a single director. A suitable suite of actors who were willing to work with this approach was recruited.

Once the approach was agreed upon, Ryan and McAllister sent the creative stories to Batty for scripting. This was when the team first glimpsed a new way of developing and creating the film scenarios.

The idea was always to use creative scenarios (in the form of scripting/film) to explore and embody the learning theories underpinning the work (and by proxy, the need of the nurse educator stakeholders). Initially, I was going to write scripts, but as Cattoni came on board, she had the much more exciting idea of developing a collaborative scripting process with the actors, myself, Ryan and McAllister to let the scenarios emerge and essentially script themselves. So, I turned instead to creating scenario briefs (creative and theoretical to meet the educational brief) and broad character backstories. This allowed the process to start, and from this, the scenarios and characters gained more flesh, weight and currency. (Batty)

This approach also suited the participatory dimension of the project. With this revised team and refreshed energy for a CrPAR approach, four clear scenarios emerged:

- (1) **Not just a meet and greet:** The nurse educator, Jennifer, meets the nursing students prior to their work-integrated learning experience.
- (2) **That doesn't make sense:** An ex-army medic turned nursing student, Todd, faces an unexpected encounter on placement. Another student, Sally, helps out.
- (3) **The man in the photo:** A timid student, James, is faced with a non-communicative older client, Marjorie, and uses a conversation-starting technique he learned in a workshop.
- (4) **Saying goodbye:** The nurse educator, Jennifer, meets with the three students, Todd, James and Sally, at the end of the placement and facilitates critical reflection on their learning experiences.

With these creative film scenarios plotted, and the acting and film crew recruited, it was time to take them into new and much more expansive cycles of participatory action research.

Playing the part

The outcomes of this iteration of CrPAR led to the development of a series of six iterative cycles (see [Figure 1](#)). Outlining these cycles is an attempt to reveal the effectiveness and simultaneous and potential messiness of the method employed generally, and the ways in which the CrPAR approach here specifically can grapple with the concomitant intricacies inherent with 'opening the can of worms' of the number of variables present when combining TL, nursing scenarios, improvisation, and emotionally weighted and personally focused and driven film work.



Figure 1. The collaborative cycles of Creative Participatory Action Research (CrPAR).

Cycle 1: To begin, Cattoni and the actors worked with the scenario briefs and broad character backstories. Mike Leigh's methods of character building were used, whereby the actors populated the physical, emotional, and psychological details of their characters and their worlds (Bradley 2014). Changes were made to the character descriptions to reflect the actors' interactions with them. For example, an original character, Shahid, a timid male student with Middle Eastern cultural heritage, became James, a timid Indigenous student. With characterisation complete, the group was ready to act.

Cycle 2: This cycle mostly took place asynchronously, using the virtual conferencing platform Zoom (2016). During the act phase, improvisation was the method of choice. Cattoni took on a directorial role in the virtual Zoom environment, briefing the actors on the intention of the scenarios, and allowing the actors to develop their dialogue and responses to each other. The outcomes of this stage were recorded and shared with the researchers.

Cycle 3: Reflection on acting and character development came next (off camera) with actors and researchers (as content experts) suggesting and making adjustments to the developing scenarios.

Cycles 2 and 3 were repeated until Cattoni and the actors agreed it was time to act and film.

Cycle 4: Acting and filming of the final version of Scenario 1 took place, which was recorded and sent to Ryan, McAllister, and Batty for Cycle 5. This scenario set the tone and style for the remainder of the scenarios. This scenario was then re-recorded in Cycle 6, to allow for insights gained about Scenarios 2–4 to inform the developing content and style.

Cycle 5: Ryan, McAllister and Batty (as researchers and clients) offered feedback to Cattoni, who shared final reflections with the actors. Ryan and McAllister examined the other recorded scenarios for authenticity and identified potential issues when the scripts drifted into problematic territory. Batty brought expertise in script and character architecture and was able to ensure what was developed collaboratively reflected the objectives of the scenarios.

Cattoni focused on characters' internal processes, narrative structure, and filmic translation. In this way, the scripts were developed and redrafted through iterative performances. While these were not in hard copy, each iteration was filmed to record the process, and earlier versions of the evolving live script were now on record.

Three repetitions of Cycles 4 and 5 involving improvisation, reflection, seeking feedback and refinement, were required to home in on a more refined outcome. The closure of each cycle occurred once the feedback from Batty and Ryan had been tested and implemented. The actors, working with Cattoni, developed their characters and modified their performances to make them dramatically more compelling, based on Batty's feedback, and more situation-authentic based on Ryan's experience and understanding of the context in which the scenarios would be viewed. Once the actors and Cattoni were satisfied with the changes, the new version was recorded and forwarded to Batty and Ryan for comment. This process of reflection and refinement continued until Cycle 6, with some final changes on the day. The cyclic process could have continued ad infinitum, however, the need to produce (film) the scenarios rightly closed the final cycles.

Cycle 6: This involved two full days of rehearsing and filming with Ryan and Batty in attendance. This again involved several iterations of Cycles 2, 3, 4 and 5. However, with the creative scenario development process already refined, the production of the three remaining scenarios served to improve what we were starting to call CrPAR – a process that resulted in unexpected and beneficial impacts on both the production of the scenarios and the practices of the researchers.

We now move to explore the outcomes that resulted from using our collaborative, CrPAR approach.

Lights, camera, action

The use of a CrPAR methodology enabled the researchers, as theory –and nursing–content experts and clients (Ryan and Batty), film director (Cattoni) and actors, to work together cohesively towards a shared goal. This occurred firstly asynchronously and then synchronously in the same physical space. Several surprising outcomes emerged from this approach, which will now be described.

In developing Scenario 1, 'Not just a meet and greet', Cycles 1–5 took place virtually. Zoom was chosen as it catered for the research team and the students' competing schedules. This approach also provided a valuable solution to overcome the vast geographical distances between Ryan and McAllister (South-East Queensland), Batty (South Australia), and Cattoni and the actors (Far-North Queensland). Collaborating virtually with Zoom's recording features also provided for ease of capturing the developing stories/scripts. Recordings were easily shared with Ryan, McAllister and Batty for critique and feedback [Figure 2](#).

During these development cycles, Ryan, McAllister and Batty were able to provide scholarly critique as well as valuable suggestions for improvement from the position of end user/ viewer (Atzmüller & Steiner, 2010; Evans et al. 2015; Gould 1996; Hughes and Huby 2002; Schoenberg and Ravidal 2000). Cattoni and Ryan were able to map the central character journeys against the transitional stages that nursing students might



Figure 2. Zoom recording of Scenario 1, screen-grab by Jan Cattoni.

face in adopting a professional persona. Ryan and McAllister also provided editing feedback on the filmed work on what might be added or taken out of the final productions, again from the perspective of the eventual nurse educator end users.

Working synchronously in Cycle 6, 'Act and film with the client', meant that Ryan and Batty took on roles usually prescribed to a director. This ensured the actors had cues, actions and words that would allow the intentions of each script to be fully realised. Batty, as expert scriptwriter was able to assist in strengthening the actors' performances through translating words and feelings into actions. Ryan was able to increase authenticity for the intended audience through directing actors to use props and adopt the movements and outward appearances of nursing students. This happened live on set during Cycle 6, in the same way a screenwriter might translate characters' feelings and motivations into actions as words on a page.

During Cycle 6, I was on set as story advisor and assistant director. This is fairly unusual for a writer, unless they're a writer-director, as writers are typically kept off set. But in this case, being part of a truly collaborative team meant that as actors performed and the camera rolled, script and story updates could be provided for each subsequent take. The added layer of being a researcher with some familiarity of TL, and certainly aware of how the eventual workshop with nurse educators would run, meant that I was also seeing with a second pair of eyes – research and training eyes. Would this happen if scripts were written and the production outsourced to a professional film crew? I doubt it. (Batty)

In comparing this experience to her previous experience using filmed scenarios, Ryan reflects:

There was a difference in the preparation from previous experiences in being able to direct the actors to become more like authentic nursing students. For example, their hair/presentation/actions/thinking/treatment of props; not leaving equipment in the hallway; and rushing to help their peers. In nursing, good critical thinkers are supposed to have creative

skills. However, I don't think we teach students to be creative because we haven't learned this way of being ourselves. (Ryan)

Cattoni took on a producer/assistant director role focusing on the process of capturing the performances. There were two production decisions made to adequately capture performances that were informed by the work already undertaken in the CrPAR development. For the health-facility based Scenarios 2 & 3, Cattoni opted for a multi-camera shoot rather than the usual single camera process where actors repeat lines for different camera positions. As our actors were improvising rather than reading from a script, a multi-camera approach allowed for a range of shot sizes to be captured simultaneously which minimised set-up times whilst providing adequate coverage for editing. Having multiple camera positions meant the actors did not have to repeat their exact lines which is difficult with improvisation. The second decision for these two scenarios was to film the scenarios in whole takes from the beginning of the scenario to the end, rather than in sections. This approach allowed the actors to remain in character for the duration of the scenario and 'bounce off' each other's performances. Both practices worked to minimise demands on the actors who were required to maintain the scenario brief while giving credible performances. A willingness to adjust the production practices to suit the scenarios contributed to the efficiency of the film shoot.

The performances that emerged from the CrPAR cycles warrant consideration. During Cycle 2, the Indigenous actor who played James raised a question about whether the elderly character of Marjorie playing opposite him in Scenario 3 ('The man in the photo') should be Indigenous or not. Batty's understanding of how conflict works within a formulaic approach to screenwriting (Batty 2010; Clayton 2007) provided a useful framework for arriving at a decision that Marjorie should be non-Indigenous. The character of James had to work harder and take a bigger risk to connect with Marjorie, increasing the tension and hence the stakes, which in turn created more compelling viewing. For Ryan, making Marjorie Indigenous would increase James' relatability to Marjorie, but this would risk constructing the scenario as an Indigenous narrative, therefore potentially giving (non-Indigenous) nurse educators who were to be the end-users an 'opt-out' to seeing themselves in the situation. Hence, the decision to make Marjorie non-Indigenous was the same for each researcher but subjected to different forms of rigour and knowledge. The Indigenous actor was involved in casting an actor to play Marjorie and chose his acting mentor as he trusted her to safely provide resistance to his character's attempts to connect with an older white woman, thus exercising agential control on how his Indigeneity was represented.

In the spirit of Murphy (2007) and dramatic realism, in the finished scenario, there is an uncomfortable moment when James attempts unsuccessfully to connect with Marjorie. The viewer watches hoping that James can push through the barriers Marjorie presents and succeed, more so because the overconfident character of Todd has already failed in his attempts to connect with Marjorie. Like a 'good' narrative screenplay, the viewer is relieved and dramatically satisfied when Marjorie finally begins to thaw and respond to James's efforts. Central to the authenticity of this performance, both actors needed to trust the process and feel they had control of a situation in which they were taking the risks. During filming, Cattoni cleared the set of everyone other than the sound recorder and camera operator so the actors could create their performances.

The actor playing Marjorie reflected:

The process was very subtle ... Marjorie wasn't giving much and James had to work hard to get a reaction from her. The key to the process though, is being mindful that to create the drama you have to have action and reaction from both actors, so finding that sweet spot where both characters start to interact with each other and create a story is a delicate process of supporting and understanding each other. It's also recognising at what point or points something gels between the characters and then bookmarking that as a point to work from or add to another element of the story. (Sarah, actor.)

Whilst it is not uncommon for directors to invite actors to shape performance in scripted roles, the CrPAR process goes much further by inviting the actors to co-create the characters from the get-go. Our process offers content creators practice options for the representation of on-screen diversity, which is currently the subject of debate (Screen Australia 2016).

Where there are specific requirements for performances, as is the case with the scenarios presented, CrPAR cycles provided multiple opportunities to achieve this using a two-way process; the researchers were also able to colonise the actors' understanding of their characters' professional roles with the overarching concerns of the project, and the actors, as recent students (of acting rather than nursing) were able to apply their own life experiences to the emergent characters. Trust in the actors' capacity to realise authentic performances enhanced the final filmed outcomes.

Out-takes

Although we have presented CrPAR as a linear process using figures and images, it is anything but. [Figure 1](#) illustrates not only the collaborative process and its iterative exposition, but how the offerings of different disciplines, here primarily nursing education scriptwriting, and filmmaking can be implicated in a novel amalgam relevant to TL, media practice and education. As we reflect on what we have developed in CrPAR, aspects of filmmaking practice are evident which are often associated with Independent Cinema (see [Murphy 2007](#); [Jackson 2021](#)), and some aspects of collaborative filmmaking as a participatory visual research method that seeks to 'explore sensitive health topics and provide insight into practices, relationships, and spaces' ([Baumann, Lhaki, and Burke 2020](#)). The specific filmmaking methods used included: a staggered approach to character and story development that allowed testing of the content over three months rather than a whole year ([Dooley 2014](#)); collaboration (virtual and face-to-face) between the interdisciplinary researchers and actors, which included improvisation; and the use of the film set itself to further explore the (fictionalised) interactions of nursing students.

The following table provides a brief overview of the models of production discussed. The proof of concept we are advancing is unusual in that it has developed in an academic environment that assists experimentation and encourages risk-taking to the extent that the academy pursues new knowledge and understandings. We have thus developed a new form of applied script development and writing that builds on traditional filmmaking processes for research purposes [Table 1](#).

The more democratised co-creation between researchers and actors adopted by our project interacted effectively with the iterative cycles of CrPAR, which in turn enhanced the quality of the scripts and performances. The actors' skills in character interpretation,

Table 1. Comparison of production models in order of relevance.

	Conventional Production	Indie Cinema	Scenario-based	CrPAR
Role of screenwriter	<ul style="list-style-type: none"> The screenwriter is the author of the screenplay. Operates in an independent way. 	<ul style="list-style-type: none"> Varies from conventional to openly collaborative with actors. 	<ul style="list-style-type: none"> Hard to gauge. Often non-professional scriptwriters, or no scriptwriter. 	<ul style="list-style-type: none"> Professional scriptwriter working closely with content expert.
Actor role/input into screenplay	<ul style="list-style-type: none"> Actors cast for fixed roles. Script refinement in rehearsal and on-set. Script changes need investor approval. 	<ul style="list-style-type: none"> Varies. Actor input into script content common, often guided by writer and director. 	<ul style="list-style-type: none"> Actors cast for a fixed role. Occupational non-actors are common with input into script. 	<ul style="list-style-type: none"> Actor input from development stage. Iterative process of ongoing refinement through rehearsal and during the filming.
Acting style	<ul style="list-style-type: none"> Faithful to script descriptions. Trained actors. Classical or method. 	<ul style="list-style-type: none"> Scripted and improvisation. Actors and non-actors cast together. Common to have actors tapping into their own 'psychodrama'. 	<ul style="list-style-type: none"> Script-based. Limited by actor experiences. Often use of key personnel who have initiated project 'acting as themselves'. 	<ul style="list-style-type: none"> Improvisation with guidelines. 'Being rather than acting'. Grafting onto some of own experiences. Trained actors.
Role of the director	<ul style="list-style-type: none"> Responsible for what appears onscreen, directing actors, stylistic decisions. Answerable to producer. 	<ul style="list-style-type: none"> Responsible for what appears onscreen. Often collaborative, sometimes not. Often an auteur. 	<ul style="list-style-type: none"> Often producer and director roles are merged into one producer role Separation of actual production from client. 	<ul style="list-style-type: none"> Shared directing. Client responsible for content and authenticity. Scriptwriter overseeing actor words and actions.
Purpose of content created	<ul style="list-style-type: none"> Entertainment. 	<ul style="list-style-type: none"> Entertainment and issue based. 	<ul style="list-style-type: none"> Instructional/Issue based. 	<ul style="list-style-type: none"> Viewer engagement and issue-based.
Production values	<ul style="list-style-type: none"> High values. Big budgets. Big crews. Whole departments. 	<ul style="list-style-type: none"> Traditionally low budget. Mixed production values. 	<ul style="list-style-type: none"> Lower budgets. Small crews drawn from corporate/branded content. Production not a high priority. 	<ul style="list-style-type: none"> Low budget values with some filmic elements.

physicality (gestures, positioning and movement), and use of props and location to develop the drama of the scenes, provided the researchers with possibilities they may not have otherwise considered. The example of Marjorie and the issue of Indigeneity illustrates how active conflict management, and its related issues can be mediated and appeased by the CrPAR approach we are advocating.

We believe another benefit of CrPAR is an increased complexity in the performances and interrelationships between characters, possibly due to the time investment in the development phase which is a very different time commitment to 'point and shoot' types of filmmaking that often occur with such scenarios, often undertaken by corporate production companies. In our project, actors were able to modify their lines and performances in an ongoing and consistent way to feedback received, which always looped back to the theoretical intentions of the project. The performances became more nuanced and consequently more believable, which we had not fully anticipated. This allowance benefitted our project by overcoming Hughes and Huby's (2002) concerns that nursing scenarios may fail if they are not relevant and authentic for the end viewer. Further, as the main three actors had been students of disciplines other than nursing, we had not expected that their response to the work – as students, not solely actors – would help us to evaluate how useful or successful the method was. In short, they became more interested in and aware of what it would feel like to be a nursing student in the given scenarios, which informed how they adapted their approach to improvisation/performance. The following excerpt from another of the actors highlights this outcome:

I got an understanding of how, as a nursing student, you have to be able to listen and communicate with a patient. It's not just textbook information. I genuinely felt bad when my patient [an actor] became so upset [because of my mishandling of an unexpected situation].
(Dell, actor)

It's a wrap

Scenarios represent a form of low-budget production that traditionally borrows from conventional scriptwriting while being issue-driven in development and purpose. In our case, this allowed a method for a better understanding of Transformational Learning in preparation for nursing students and nurse educators undertaking successful clinical learning experiences. There is little research available on the modes of scenario-based production. Given the increasing use of creative methods not only in non-creative disciplines but also in learning scenarios, we believe the CrPAR approach we have described offers a useful and replicable framework for others working within similar disciplinary environments. Our film scenarios have been tested with the intended nurse educator audience with results due for publication elsewhere. Preliminary data analysis showed the audience appreciated the use of the film scenarios as trigger material that had a high degree of authenticity and realism that was meaningful to them.

Considering the implications of CrPAR as an approach to interdisciplinary research, from this project each researcher saw areas of strength and areas for consideration for wider uptake in future work. There was general agreement that the development phase was lengthy and resource-intensive so sufficient consideration of resource allocation is important to the success of a project like ours. The lengthy development phase was offset by the relative efficiency of the filming phase which is traditionally more resource-demanding of crew and equipment. In terms of human resources, McAllister reflected on the experience for the nurse educator end-viewer and saw the inclusion of a content expert, a scriptwriter, a filmmaker with directing experience in improvisation, and trained actors were key to the success of this experience.

Viewers, who will be nursing academics or clinical teachers, are like other viewers in that they are hoping to relate to characters, feel a little tension and drama. But they are unique too because they have experience with the issues conveyed, as well as the frustration or helplessness that often comes with them. So as content experts, I found myself looking at the drafts thinking, 'is this credible?', and suggested edits alongside this. I was picturing the videos being discussed with a group of diverse educators, and thinking 'Would this pique their curiosity, inspire them to rethink practices in their work as educators?'. Ultimately, I think they really do! (McAllister)

Additionally, it was imperative that the key participants were prepared to realise the importance of trust and honesty during the research process. Rather than following a known process guided by the 'blueprint' of the script, the project participants needed to feel comfortable with a much less certain approach, as Ryan highlighted:

I think anyone embarking on using CrPAR needs to be able to work iteratively, tolerate uncertainty, invite a multi-disciplinary polyphony, embrace participatory action research approaches, and create a safe space for participants to contribute their thoughts and experiences throughout the production process. I think there are many benefits to all involved with a process like CrPAR. Everyone should consider developing the above skills and embrace CrPAR when developing educational artefacts. I also think CrPAR has far reaching multi-disciplinary benefits. (Ryan)

As outlined, there is literature on creative scenarios in health education settings, so there is already a base for this work; however, putting this more firmly in the field of education, and using collaborative scripting as a specific method, is, we believe, novel and appealing. For researcher Batty:

CrPAR is a great process to undertake in the screen industry and should probably happen more often, for example, in fields like education. From a nursing education point of view specifically, and an education practice point of view broadly, this project and its method offer great potential in the following ways:

- innovative/new ways of generating research findings;
- innovative/new ways of conducting research (bringing stakeholders into the process and not pre-determining answers);
- allows for complexity and nuance in understanding;
- brings disciplines together so they can all learn from each other – clearly generates research dissemination opportunities in multiple forms and across disciplines – provides (arguably) more accessible, digestible, and interesting research content.

What can creative practitioners learn about other disciplines/practices/professions from taking part in work like this? What, for example, might the actors from this project learn about nursing and dealing with patients? I can see this having reciprocal benefits.

Researcher Cattoni summed up her experiences of CrPAR's contribution to filmmaking:

The main advantage of our approach was the integrity of the content creation from conception to delivery. There were multiple opportunities to review the scripts and performances and refine them to ensure they met the brief. The visual image I have in my mind is of a dynamic process where Ryan, McAllister and Batty were metaphorically able to put their hands through the screen and mould the content and performances at each rehearsal and then on the final day of filming, when Ryan and Batty directed the final shoot. The actors experienced some challenges being directed by more than one person (Batty and Ryan) during the filming phase, however, a more staged process for providing feedback could be developed to address this. Overall, the process provided a rich and non-typical experience for the actors.

There are many ways to develop vignettes for educational purposes. We believe that the novel CrPAR approach described in this article not only worked for this arts-health-education context but could also work for other research contexts. As described, successful CrPAR was made possible through an interdisciplinary team from nursing, film, and script-writing, collaborating in ways that would not be possible within siloed disciplinary boundaries. This kind of work promotes authenticity and realism for the research subject in question, and also an exciting methodological approach that adds as much to the skillsets of the researchers themselves as it does the subject matter. We invite others into this space of risk-taking and novelty, encouraging a playful yet rigorous approach to knowledge creation and dissemination in the contemporary academy.

Note

1. Two recent films depicting these filmic and theoretical underpinnings are Chole Zhao's *Nomadland* (2020), which won the 2021 Academy Award for best film and deals with the disenfranchisement of the working poor and aged in middle America as its central theme; and Zhao's previous indie film, *The Riders* (2017), which is set in Lakota reservation in Montana and employed collaborative scripting with the main cast playing versions of themselves, a technique she also employed in *Nomadland*.

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Jan Cattoni's professional career spans the disciplines of filmmaker and paediatric intensive care nurse with broadcast credits as a writer and director of scripted content and documentary. Jan has worked as an academic in nursing and screen production with research interests in the emergent field of arts health, collaborative scripting, and documentary.

Colleen Ryan works with groups, and individual clinicians, to develop meaningful professional development to support clinical teachers in managing and overcoming the challenges, tensions and rewards experienced in the role. Colleen Ryan has previously worked in Intensive care units as an RN, and coordinated a QLD Health youth drug and alcohol, harm minimisation and sexual health program. Since returning to nursing Colleen has worked in aged care, a surgical ward student hospital clinical facilitator and university academic for 10 years.

Craig Batty is an award-winning educator, researcher and supervisor in the areas of screenwriting, creative writing and screen production. He is also an expert in creative practice research methodologies and has published over 100 books, book chapters, journal articles and creative practice research works, as well as industry articles, book reviews and interviews. He has also guest edited 10 journal special issues. Craig has also worked on a variety of screen projects as a writer, script editor and script consultant.

Margaret McAllister has a background in nursing and mental health nursing and gained a doctorate in education in 1997. Since this time, she has become an experienced health and social science researcher and has conducted many participatory studies with vulnerable communities, particularly in mental health and health promotion. She has published 10 books and over 170 refereed journal articles, most notably in the area of resilience and nurses' empowerment. She is concerned about the future of nursing, and the need for flexible health systems that focus on community engagement and self-care.

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