

## Critical Thinking Is More Than Problem Solving

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As someone who is passionate about teaching and writing about critical thinking and nursing process, I enjoyed Diane Salipante's article, *Critical Thinking Spans the Continuum*. However, I do feel it's important to shed a bit more light on the following statements, lifted from her article:

*Unlike the five-step nursing process, critical thinking cannot be taught as a competency in a basic educational program. Critical thinking is a problem-solving method that becomes a part of each nurse's character through the acquisition of knowledge and experience.*

While many believed the above in the nineties, these two statements are likely to be interpreted in ways that are "out of sync" with the most recent critical thinking (CT) literature. A major point stressed today is that CT must be viewed as being more than a problem-solving method. If you have only a problem-solving mentality, you're not a critical thinker. Critical thinkers look at their practice critically even when no problems exist, asking questions like, How can we do this better? How can we give more value? How can we promote creativity? and, How can we ensure that we're looking at outcomes over time?

The other issue is that CT skills *can* be learned. If we say they can't be learned, does that mean we don't teach them? In my business, I talk with many educators---both from hospitals and schools of nursing. It's clear that many organizations are making *significant* improvements in how CT is taught and evaluated as a competency.

Nationally, thanks to *Educational Goals for 2000*, many states have made major improvements in teaching CT skills to children in grade school. Anyone with kids in K-12 grades knows how differently they learn today, and how much better they are at generating and evaluating ideas, compared to us at those ages.

Studies show that the most important factor that determines whether something is learned is whether it's believed that it can be learned. Critical thinking---as Ms. Salipante points out so well---requires developing nurses' character through the acquisition of knowledge and experience. But it is learned. Principles related to character and values *must* be taught. Theoretical and experiential knowledge are best gained under the guidance and coaching of skilled, knowledgeable preceptors and teachers. CT must begin in basic education, and we must continue to find ways to nurture and evaluate it as a competency. As a colleague of mine says, "Fostering, supporting, and rewarding critical thinking is key to recruitment and retention. If we don't encourage nurses to grow in these skills, they become task-oriented and frustrated with the organization, thinking *I'll just do as I'm told, try not to think too much, and not say a word.*"

We have too many wounded, good thinkers in nursing. Nurses and leaders must become familiar with (and sensitive to) issues related to teaching, nurturing, and evaluating critical thinking in diverse thinkers. In many cases, we don't have to make nurses smart. We have to stop making them stupid.

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