



Midwifery education in practice

Teaching evidence based practice and research through blended learning to undergraduate midwifery students from a practice based perspective

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ABSTRACT

The international world of higher education is changing with universities now offering students flexible delivery options that allow them to study away from campus and at a time convenient to them. Some students prefer on line learning while others prefer face to face contact offered through a traditional lecture and tutorial delivery modes. The response by many universities is to offer a blend of both. While online and blended mode of delivery may be suitable for some subjects there is little knowledge of the efficacy of blended learning models to teach evidence based practice and research (EBPR) to undergraduate midwifery students. EBPR is a challenging, threshold level subject upon which deeper knowledge and skills are built. This paper describes the design, delivery, and evaluation of an undergraduate EBPR course delivered in blended mode to first year midwifery students. Components of the blended learning innovation included: novel teaching strategies, engaging practical activities, role play, and e-learning strategies to maintain engagement. University-based course evaluation outcomes revealed very positive scores and the course was rated within the top ten percent of all courses offered within the Health Group at the host University.

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Introduction

Increasingly, universities are offering students flexible delivery options allowing them to study online, away from campus, and at a time convenient to them (Tanner, 2011).

Evidence across international settings demonstrate that online material supported by podcasts results in greater student engagement and overall knowledge acquisition when compared with a traditional lecture, without a loss of satisfaction with teaching (Bhatti et al., 2011; Rabe-Hemp et al., 2009). Students irrespective of background have variable opinions about the efficacy of on line learning with some preferring face to face contact offered through a traditional lecture and tutorial delivery modes (Farley et al., 2011). The response by many universities is to offer a blend of both. While online and blended mode delivery may be suitable for some subjects there is little knowledge of the efficacy of this model to teach

evidence based practice and research (EBPR) to undergraduate midwifery students.

It is well acknowledged that student nurses and midwives find EBPR a challenging subject (Newton et al., 2010; Peckover and Winterburn, 2003). Whilst there is a paucity of literature on teaching this subject to student midwives it can be assumed that issues are similar. EBPR is a threshold level subject upon which deeper knowledge and skills are built to enable midwives to enter the workforce as critical thinkers and reflective practitioners. The disconnect between research active staff and the teaching of undergraduate students that is currently evident in some universities has been cited as problematic, with many students taught by lecturers who are not currently engaged in research, or employed in teaching intensive roles (Strickland et al., 2012). Another challenge includes the lack of engagement with research by clinical staff (Forsman et al., 2009). Student midwives spend up to 50% of their program hours within the clinical environment where program based learning should be embedded through interaction and engagement with clinicians. This interaction across education and practice can be facilitated by the use of e-learning technology which enables the student to be situated in the practice environment, but access learning materials at a time convenient to them (Stewart et al., 2012). The use of e technology also enables research

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active staff to be more readily involved in student teaching. This paper describes the design, delivery and evaluation of an undergraduate evidence based practice and research blended learning course undertaken by students in the first year of their Bachelor of Midwifery program. The paper proposes the benefits of a blended learning environment, but also highlights a number of other important ingredients as seemingly necessary to underpin successful delivery and positive student evaluation.

Designing the program

The course 'Research, Evidence and Clinical Practice' was developed for delivery within a blended learning environment. In designing the course the belief was that the approach to teaching evidence based practice and research (EBPR) within the midwifery programme should be laid down early in the programme and then interwoven and built upon throughout the programme. An understanding of EBPR is important to facilitate the provision of evidence based care (McCurry and Martins, 2010). Hence, the essential requisites of the course were that it would engage students, enabling them to develop an appreciation of the value of evidence based practice/care; to cultivate research knowledge and skills but to stimulate and nurture an interest in and an appreciation of EBPR, which would become embedded in their practice and continue past the point of registration. The underpinning philosophy of the course was that good research emerges from and feeds back into practice, therefore practice experience should be the leading aspect. The course material was developed by the UK author (JJ) in partnership with the Australian course convenor (MS).

There is debate about the best time to introduce EBPR within curricula. Ax and Kincaid (2001) found that students disagreed with research methods being taught early in the programme. However, the belief here was that this course should provide a firm foundation for students to consider research and evidence as the foundation of good clinical practice and the development of critical thinking skills. As a consequence, the decision was made to deliver this course to undergraduate midwives in year one, semester two. This enables students to develop a practice focused approach to research early in their programme, critique and reflect on programme content and understand the evolutionary nature of clinical practice. Incorporation of a clinical focus in research has the potential to invigorate nursing students (Rash, 2005) and promote a fuller appreciation of the connection between research and practice (August-Brady, 2005). Students need to consider research skills and knowledge as a tool to be used in order to successfully complete their degree and then guide them through their careers as reflective evidence based practitioners.

The design of the course aimed to take the students on journey, beginning the discovery of how generating evidence changes practice and why practitioners resist changes in practice. The programme then addresses all the traditional aspects of research courses but with their own – and others – practice experiences as a constant reference point. This encourages autonomous intrinsic learning by placing the emphasis on the student to distinguish and develop their own areas of research interest. This provides an opportunity for experiential situational learning, which is known to be more effective than surface based learning (Pugsley and Clayton, 2003; Clark et al., 2009), where facts may be retained but students are unable to relate them with meaning and context. This approach is further reinforced by the use of 'real world' assessment items.

Another key aspect of the curriculum design for this course was the explicit use of the research experiences of lecturers and 'home grown' resources such as articles written by faculty or other academics likely to be well known to students, enabling students to contextualise their learning within the course. Adults learn best

when the topic is perceived as being of value (Ramsden, 2003), therefore the presentation of research as a theory based topic with no relevance to the clinical context does not encourage a deep approach to learning (Johnson et al., 2010). The approach taken here aimed to make the content of the module meaningful to students, promote deep learning, and through a reflective framework create an overt relationship between theory and practice.

The course structure consisted of seven modules

- Evidence based practice
- Research theory and design
- Reviewing and critiquing the literature
- Quantitative research design and methods
- Qualitative methodologies and methods
- Ethics
- From evidence to practice: from practice to evidence

Assessment design

The goal of assessment is to foster independent learning and equip students with the skills to situate their learning in the 'real world' of practice. The aim was to produce assessment items that used a variety of approaches to assess learning and incorporated the different learning styles used by students. Learning objectives were clearly related to assessment items so students could see the purposeful link of both to their degree (Biggs and Tang, 2007). These strategies not only promote deep learning and understanding around a subject, but also reduce student attrition (Fry et al., 2003; Kiguwa and Silva, 2007; Lizzio, 2011; Norton, 2009; Ramsden, 2003; Sadler, 2009; Stefani, 2009). The assignments within this course were overtly linked to the purpose of the degree and provided early engagement with work-integrated learning, all strategies known to promote success (Lizzio, 2011). The assessment items within the course aimed to build, refine and consolidate skills consistently maintaining a real world focus.

Program delivery

In line with "blended mode" delivery, students attended two workshop days on campus at the beginning of the semester where they were introduced to the core themes and topics of the course. The aim of the workshops was to motivate and engage students and develop a passion for the subject. This was achieved through the use of a blend of practical activities, role play and engagement with research active faculty.

Practical activities

One example of this approach was an activity where students worked in groups and looked through an age span of midwifery text books to identify changes that had occurred in practice over the years. The lecturer then introduced the students to key research studies that had prompted the changes they identified. An example would be sleeping position for babies changing in relation to reducing the risk of Sudden Infant Death. In order to contextualise the changes the author (MS) shared with students her personal involvement as a researcher in the Confidential Enquiries into Stillbirths and Deaths in Infancy (CESDI) cohort studies that led to this change in practice (National Advisory Board, 1996). Students then discussed why changes may be resisted by practitioners who learnt their facts around practice from the older text books. This activity not only encouraged reflection on practice but contextualised the resistance to change they see in practice. Many students shared their own experiences of advice they were given by

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