



## Midwifery education in practice

## Analysis of midwifery students' written reflections to evaluate progression in learning during clinical practice at birthing units

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## ABSTRACT

Written daily reflections during clinical practice on birthing units have been used during several years in midwifery education at Lund University, Sweden. However, the usefulness of these reflections for evaluation of progression in learning and professional development of students has to date not been evaluated. In order to analyse written reflections, two taxonomies developed by Bloom and Pettersen have been applied to the texts. Progression in the professional development of midwifery students can be seen through levels of complexity in cognitive and psycho-motor learning areas and also in the description of learning situations. Progression can be seen from a basic description of facts in simple situations at the beginning of the students' practice to a complex description of complicated situations towards the end of the practice. Written daily reflections appear to be a suitable method to help students to reflect in a structured way, thereby helping their professional development. Reflections can help clinical supervisors to understand the needs of the individual student and to support their knowledge accrue. Daily written reflections on clinical practice can be of use in other health education programs.

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## Introduction

Written daily reflections during clinical practice on birthing units have been used during several years in midwifery education at Lund University, Sweden. However, the usefulness of these reflections for evaluation of progression in learning and professional development of students has to date not been evaluated.

## Background

During midwifery education, theoretical knowledge and learning are integrated with clinical competence in order to maintain progression and professional development based on a holistic approach to professional practice. Some types of knowledge can be accumulated through theoretical learning whilst others are dependent on context and learning can only occur during situations

in real time (Boud and Walker, 1998; Dreyfus, 1982; Yardley et al., 2012). In these situations, reflection is an integral part of learning (Elmgren and Henriksson, 2010) and there is a need to develop validated methods to support students' reflections during clinical practice. Research has shown that structured reflection models enhance reflective thinking in clinical practice (Asselin and Fain, 2013) and that students' narratives may uncover practices that otherwise might go unnoticed (Levett-Jones, 2007). Schön (1995) described two types of reflection; "reflection-in-action" and "reflection-on-action". Using personal experiences as a base, the aim of reflection is to develop knowledge and skills that can be called upon when similar clinical situations occur in the future (Mann et al., 2009).

In Sweden, midwifery education is at present based firstly on a three-year university course leading to registration as a qualified nurse followed by a further 18 months in the midwifery program. Acceptance to the midwifery program is dependent on both previous registration as a nurse and that the presumptive student has had at least one year of clinical experience after registration. Many midwifery students have worked for several years in nursing practice. The program entails a total of 90 ECTS of which 45 ECTS are assigned to specific clinical midwifery practice. During this period the student learns about normal birth and should develop

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from an individual who may never have earlier witnessed a birth to a practitioner who can independently supervise one or more normal births simultaneously (Syllabus, SBMP 18). Clinical placements follow directly after the theoretical courses; the theoretical course in normal birth (six weeks) is followed by two blocks of clinical practice of 12 weeks. A theoretical course in complicated birth (4 weeks) is followed by a five week block of clinical practice. All students have their clinical practice blocks simultaneously. The headings “*knowledge and understanding*” and “*skills and abilities*” are learning targets in the program’s curriculum and are based on variables stipulated in the examination requirements (Swedish National Agency for Higher Education, 1993:100). These areas are compatible with the cognitive and psycho-motor areas of learning which are of importance for development of professional knowledge (Elmgren and Henriksson, 2010). There is no universal consensus on the definition of “*profession*” although there are phenomena that signify a professional body: a group of individuals with agreed ethical norms, which is judged by society to have special knowledge and skills that have been accrued through education and professional practice at a high level of competence (Australian Council of Professions, 1997). Professional practitioners intend to use their knowledge and skills to help individuals and society in general (ICM, 2008; Cruess et al., 2004; Australian Council of Professions, 1997).

According to the Dreyfus model of mental activities involved in directed skill acquisition, a student passes through five stages during learning: novice, competence, proficiency, expertise and mastery (Dreyfus and Dreyfus, 1980). In 1984 Patricia Benner modified the model for a nursing context and conceptualised it as novice, advanced beginner, competent, proficient and expert. A novice relies often on fast principals and regulations whilst an expert reacts in an intuitive manner and with a view of the whole situation (Benner, 1984). The novice tends to be an observer whilst the expert participates actively in the situation (Benner, 1984).

The way in which educators view knowledge will reflect on the students learning (Elmgren and Henriksson, 2010). Marton et al. (1977) separate an approach to surface learning from an approach to deep learning and describe surface learning as atomistic whereas deep learning is seen as holistic. Surface learning is described as rote learning of facts. Deep learning is described as interpretative learning where the student strives to understand meaning, connection, context and implication. The Swedish Board for Health and Welfare (2006) requires that midwifery competence be characterised by a holistic approach. Laws governing Swedish tertiary education state that teaching should develop students’ ability to carry out independent and critical judgements and their ability to independently recognise formulate and solve problems (Swedish Higher Education Act, 1992:1434, Chapter1 § 9). In order to assess the level of knowledge attained, it is possible to apply different taxonomies (Elmgren and Henriksson, 2010). Bloom’s taxonomy encompasses cognition and informs on six differing levels of knowledge from basic to complex as follows: knowledge, comprehension, application, analysis, synthesis and evaluation (Bloom et al., 1956). According to Pettersen (2008) the area of psycho-motor skills can also be divided into six different levels of complexity from perception, readiness for action, imitation, routine actions, and complex skills to fully developed proficiencies. During recent years the clinical practice components of health care education have received considerable attention in Sweden (Elmgren and Henriksson, 2010). Evaluation of the usefulness of written daily reflections on experiences of clinical practice may help to provide evidence-based methods for the support of students’ learning and professional development. Teachers’ understanding of the characteristics of critical thinking in clinical education will help them to identify students’ progress and evaluate their

competencies (Naber et al., 2014). Students stand to benefit from increased ability to critically reflect, since reflection will allow them to create strategies for the management of clinical issues within their profession (Joyce-McCoach et al., 2013).

The aim of the present study was to evaluate progression in learning inherent in student midwives’ written daily reflections on practice.

## Methods

### Design

Reflections written by a cohort of midwifery students were analysed by means of a qualitative method with a deductive approach.

### Subjects

Daily reflections were written by a group of 18 midwifery students at Lund University, Sweden, during a 17-week clinical placement at birthing units at six different hospitals in southern Sweden in 2011–2012. The students were aged between 28 and 43 years and had worked as registered nurses a mean of 4.5 years before the commencement of their midwifery education.

### Data collection

Student midwives were encouraged to write short descriptions of the clinical situations they had experienced during the day and to formulate reflections on the situation based on Gibbs reflection model (Gibbs, 1988). This model is composed of six areas of reflection; *description, feelings, evaluation, analysis, conclusions and action plans*. The student’s clinical supervisor also wrote a short comment relating to the student’s reflections. The average number of reflections written by the students in the 17-week period was approximately 75 and an approximate total of 1400 reflections were collected by the authors (EKP and ME). The students numbered their delivery reflections in chronological order, starting with the number one for their first delivery. They also wrote reflections on the care they gave to women who did not give birth. In order to group the reflections in periods of time, an arbitrary sample of every fourth reflection was made and studied. A total of 388 reflections were analysed in this study. Each of the handwritten reflections was between a half and two pages long. After each reflection a space was left for a short comment from the student’s personal midwife supervisor. Before analyses could begin the reflections were transcribed to a computer program and all manner of identification of individuals was removed.

Citations are shown with a number depicting how many births the student had attended and a student number; for example birth number 21 and student number 10 is written as B21/S10. The reflections where the woman did not give birth are coded as “none birth” (NB) and the same number as the previous birth the student had attended.

### Data analyses

Bloom’s taxonomy (Bloom et al., 1956) and the taxonomy described by Pettersen (2008) were both used to manually analyse and classify the students’ texts. Together, the two taxonomies describe levels of complexity from basic to complex, within cognitive and psycho-motor areas of learning. In the analyses, a deductive approach was used to allow a hierarchical classification (Bloom et al., 1956). Analyses of the students’ texts were carried out in order to evaluate progression in the reflections seen by changes

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