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Midwifery Education in Practice

Evaluation of an online master's programme in Somaliland. A phenomenographic study on the experience of professional and personal development among midwifery faculty



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ABSTRACT

To record the variation of perceptions of midwifery faculty in terms of the possibilities and challenges related to the completion of their first online master's level programme in Sexual and Reproductive Health and Rights in Somaliland. The informants included in this phenomenongraphical focus group study were those well-educated professional women and men who completed the master's program. The informant perceived that this first online master's level programme provided tools for independent use of the Internet and independent searching for evidence-based information, enhanced professional development, was challenge-driven and evoked curiosity, challenged professional development, enhanced performant and challenged context-bound career paths. Online education makes it possible for well-educated professional women to continue higher education. It furthermore increased the informants' confidence in their use of Internet, software and databases and in the use of evidence in both their teaching and their clinical practice. Programmes such as the one described in this paper could counter the difficulties ensuring best practice by having a critical mass of midwives who will be able to continually gather contemporary midwifery evidence and use it to ensure best practice. An increase of online education is suggested in South-central Somalia and in similar settings globally.

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Introduction

In this study we recorded the variations of perceptions, referred to as conceptions in phenomenographic writing (Marton, 1981, 1986), of midwifery informant in terms of the possibilities and challenges related to the completion of their first online master's level programme in Sexual and Reproductive Health and Rights (SRHR) in Somaliland.

Somaliland is one of three regions in Somalia: Somaliland,

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Puntland and South Central Region (UNPOS, 2013). In Somalia, Traditional Birth Attendants (TBA) attends 80% of women birth at home, while Skilled Birth Attendants (SBA) attends 20% birth in health facilities (MoHP, 2015). Somalia has one of the highest maternal (732/100 000) and child (137/1000) mortality ratios worldwide (The World Bank, 2015a; 2015b). One key issue is the shortage of qualified healthcare providers. During the civil war there was a dramatic loss of qualified healthcare providers, reflected in a ratio of two midwives per 100 000 people. The effects of the war led to large-scale migration of nurses and midwives mainly to nearby countries, United Arab Emirates, North America, United Kingdom and Scandinavia (WHO, 2014). In Somalia, midwifery has been a separate profession since the 1950s, and remains so today despite the civil war in the 1990s (WHO, 2014). In Somalia, midwifery is a post-nursing qualification and a distinct profession

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as per international standards (ICM, 2010).

Somaliland is a self-declared country, with a population of approximately 3.5 million. The Somaliland Nursing and Midwifery Association (SLNMA) was founded in 2004 as a membership organization to promote nursing and midwifery and to assist in the development of high-quality care through education and regulation. SLNMA has until date approximately 350 members and plays an important role in the standardization of midwiferv education. SLNMA is one of more than 100 midwifery associations represented by the International Confederation of Midwives (ICM). The ICM standards for midwifery education with a set of guality indicators for global expectations (ICM, 2013) have been met by the four midwifery institutions/universities providing midwifery training in Somaliland. The minimum education level required for entrance into nursing is 12 years of schooling; nurses can enter the field of midwifery upon completion of an 18-month postgraduate diploma programme in midwifery. For more than two years now, the career path for nurses and midwives has included bachelors and master's degrees. SLNMA has furthermore agreed, together with the universities in 2012, that a midwifery career path should include PhD studies preferably through on-line education from Swedish universities. The career path is supposed to ensure that the midwifery profession retains its status as a distinct profession. Therefore, the minimum qualification required for being a faculty/director of a programme in midwifery was set at a bachelor's degree in midwifery (MoHP, 2015). At the time of writing, some 250 diploma midwives, 21 bachelor-degree-level midwives and 24 newly graduated master-degree-level midwives serve the population in Somaliland. For a sustainable provision of high-quality midwiferv informant and leaders, the Somaliland Government's National Gender Policy 2009–2012 emphasized the importance of qualified midwives and midwifery educators. A priority to upgrade midwifery faculty and leaders to the master level was thus in line with the Government's gender policy. The Ministry of Health in Somaliland has made great efforts to re-open midwifery institutes to address the demand for educated midwives. However, midwife educators were found to be inadequate in terms of both number and quality (MoHP, 2015) when attempts were made to re-establish this core health profession and have educated, regulated midwives that met with international standards (ICM, 2010).

Online master-level training in midwifery (SRHR) offered the possibility for the faculty to come together in teams around the computer at the universities. This approach of educating midwives and midwifery educators online has been presented as innovative not only for theoretical education but also for clinical practice, inter-professional collaboration, health-policy development, and for global health reporting (Reis et al., 2015). In the Lancet series on midwifery, innovative approaches have been identified as necessary if the sustainable development goal of fewer than 70 maternal deaths per 100 000 livebirths in 2030 through the provision of maternity care to the population in terms of both quantity and quality is to be achieved (Koblinsky et al., 2016; Renfrew et al., 2014).

To address the need for educated and regulated midwives that meet with international standards, Dalarna University in Sweden piloted a one-year online master's programme in SRHR in collaboration with two public universities in Somaliland. The programme ran over a period of two years with the first group of 24 faculty graduating in September 2015. After this group had completed the first online master's programme for midwifery faculty in Somaliland, it was important to examine the possibilities and challenges it presented. This, while keeping in mind the fact that online education at the master's level might be a unique and innovative approach to building capacity of midwifery informant on a broad front internationally (Koblinsky et al., 2016; Renfrew et al., 2014). The aim of this study, therefore, was to record the variation of perceptions of midwifery faculty in terms of the possibilities and challenges related to the completion of their first online master's level programme in SRHR in Somaliland.

Method

Design

The informants included in this phenomenographical focus group study were those well-educated professional women and men who recently graduated from the first online master's programme in SRHR in Somaliland. In this study, we recorded the variations of perceptions, referred to as conceptions in phenomenographic writing (Marton, 1981, 1986). Ethical approval was obtained from the University of Hargeisa Ethical Board in 2013. In the study, we followed the guidance of the Belmont Report (Miracle, 2016) regarding ethics, as based on the Helsinki Declaration. In the findings section, the informants are identified by a letter, to maintain their confidentiality.

A brief overview of the master's programme

Initial phase

The use of online technology in midwifery faculty training was a relatively new phenomenon in 2010–2012 (Reis et al., 2015) when Dalarna University identified the potential with online technology to increase the number of midwifery faculty and target specific skills gaps. The project built on collaboration between Dalarna University and two universities in Somaliland, SLNMA, and governmental ministries in Somaliland. Context-specific curricula and syllabi for the online midwifery faculty master's programme were developed. The midwifery faculty were at that time novice user's with online learning and their experiences were investigated and published in 2015 (Omer et al., 2015).

Implementation phase

Activities were overseen by a steering committee on a quarterly basis over the years to assess the master's programme in terms of targets and to document lessons learnt. Evaluations were undertaken in each course. Dalarna University provided technical support, including online teaching and library resources, in order to build capacity. Live-streamed and pre-recorded lectures, together with online virtual meetings in seminars, were provided. The activities in each course were monitored using a learning platform and a plagiarism tool. By using online learning platforms and with the support from a team at Dalarna University, 80% of the teaching and learning was online. For the remaining 20%, meetings were held at the local university with the local coordinator for the project. Faculty at Dalarna University travelled to Somalia three times each year and spent a few weeks there to provide support for the examinations and to help with the introductions to upcoming courses. During the visits, the Swedish faculty also supported the Somaliland universities with IT support staffs, and attended steering committee meetings. The Somaliland universities were initially provided with mobile Internet and at a later stage, broadband access was introduced. There was a choice to study from home; however, Internet connectivity was provided free at the universities.

Structure and content of the master's program

A master program for midwifery faculty could be of one or two

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