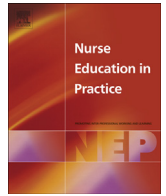




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We're all in this together: Midwifery student peer mentoring

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ABSTRACT

Many higher education institutions have adopted mentoring programs for students as a means of providing support, improve learning and enhance the student experience. The aim of this project was to improve midwifery students experience by offering a peer mentoring program to commencing students to assist with the transition to university life and the rigours of the midwifery program. This paper reports the evaluation of this specific mentoring program and the ongoing development and implementation of a sustainable program within an Australian University. A survey design was adopted to gather feedback from both mentees to evaluate if the peer mentoring program enhanced the first year midwifery student experience and ascertain how the program could be further developed. Fifty-five students engaged with the peer mentors and completed the questionnaire regarding the mentoring program. Specifically valuable was the positive impact that mentoring had on midwifery student confidence, managing the demands of the program and being motivated to keep going when the program requirements were challenging. The success of this program rested largely with mentoring students sharing their own experiences and providing reassurance that other students could also succeed

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Introduction

The Bachelor of Midwifery is a demanding university degree with significant clinical experience embedded in the program alongside a robust academic curriculum. This requires a high-level of commitment on the part of the student from the very beginning of the course and ongoing support to ensure that they are able to successfully meet both the academic and clinical requirements of the program. Many higher education institutions have adopted mentoring programs for students as a means to provide support, improve learning and enhance the student experience, with peer mentoring widely acknowledged as a successful form of mentoring (Pendleton, 2005). The aim of this project was to improve the student experience by providing support to commencing students with the transition to university life and the rigours of the midwifery degree through a peer mentoring program. Specifically, it sought to assist with the development of critical 'soft skills' including time management, organisational skills as well as increase confidence through interactions with senior students. This paper reports the evaluation of this specific mentoring program

and the ongoing development and implementation of a sustainable program within the School of Nursing and Midwifery.

Background

During the 1980's nursing and subsequently midwifery in Australia, were transitioned from apprenticeship style training, most commonly offered through hospital programs, to university education. In 2002 the first iteration of the inaugural undergraduate midwifery program was offered in Australia (McKenna and Rolls 2007). This enabled students to study midwifery without first being a registered nurse. Midwifery programs offer high quality, evidence based teaching with students undertaking their clinical experience across a range of settings, hospital, community, home and now, more recently through simulated learning environments. In order to register as a midwife in Australia, both undergraduate and post registration midwifery students must fulfil minimum requirements of clinical experiences as mandated by the regulatory bodies in Australia (ANMAC, 2014). The Australian Nursing and Midwifery Accreditation Council (ANMAC) Midwife Accreditation Standards (ANMAC, 2014) require midwifery students to undertake 50% of their program as clinical experience and stipulate specific clinical requirements in order to register as a midwife on graduation. These requirements are significant and must be documented and verified, requiring students to maintain a comprehensive portfolio as evidence. Commencing students have

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identified through course evaluations that understanding and managing the clinical demands of the program along with transitioning to university life can be challenging. Additionally, as nursing is no longer a prerequisite for studying midwifery, there has been a significant increase in school leavers enrolling in the program.

In 2012, six, third-year midwifery students initiated and volunteered to mentor the commencing first-year Bachelor of Midwifery students. These students identified from their own experience that beginning students can easily feel overwhelmed with the transition to university life as well as juggling the academic and clinical demands of the program. They proposed that informal mentoring activities would provide increased support and assist students in their first-year. These students initially established the program by offering to meet with groups of students rather than one-to-one, they felt that a group format would enable more students to be involved and still be manageable. In response to this student-led pilot a group mentoring program offering peer support was developed and evaluated throughout 2013 and 2014.

Peer mentoring has been described as a “process in which people who share some social similarities help each other to learn in a reciprocal fashion” (Milne et al., 2007, p 3). In higher education settings this means that peers, rather than academic staff, engage with each other to provide support and assistance, generally one peer has more knowledge or experience (Colvin, 2007). This support can be offered through a variety of ways including one-to-one, groups and via electronic media. The mentor acts as a role model to the mentee by sharing past experiences and drawing on their own knowledge and skills to provide assistance as necessary (Andrews and Clark, 2011; Fox and Stevenson, 2006). It has been suggested that peer mentoring provides an alternate way for students to learn, contributing to a positive experience in both academic and psychosocial aspects of higher education.

In a review of literature undertaken by Andrews and Clark (2011), it was identified that students sought peers as mentors for a variety of reasons including assistance with the transition to university life, being able to discuss academic work, gaining help to manage the demands of the program and the profession, as well as other personal reasons. They also found that students believed that their student peers were more able to respond to their questions and understand their needs than academic staff. A number of challenges with peer mentoring were highlighted including the time involved and the need for clear academic and personal boundaries between the mentor and mentee (Andrews and Clark, 2011; Townsend et al., 2011). However, while challenges exist there appears to be the potential for benefits for students, not only the mentee but also the mentor in providing an opportunity for personal development.

A number of universities in Australia have adapted some form of peer mentoring to support students in the transition to university but there are very few which focus on the midwifery student and specifically the need to support students in their preparedness for the demanding aspects of the clinical experience required (Milne et al., 2007). The aim of this mentoring program was to improve the experience of first-year midwifery students by offering peer support. Three specific objectives were to:

- Provide support to first-year midwifery students by linking new students with experienced third-year students.
- Assist with the orientation to the University and managing the demands of the midwifery program, particularly the clinical components of the program.
- Provide a safe forum for discussion and ongoing support and encourage student to actively engage with their program.

In 2013, 2014 third-year midwifery students were sought to volunteer in the peer mentoring program through an email invitation. Seven third year students volunteered in 2013 and eight in 2014. Students who volunteered were provided a formal 3 h development session on mentoring skills to ensure they were prepared for this role. The training outlined various mentoring styles, communication, outcomes and importantly establishing group norms and boundaries for themselves. During orientation and through the foundation course in the Bachelor of Midwifery, the mentors were invited to speak with first-year students. The mentors introduced themselves, sharing their background and experience studying midwifery. Students were then asked to form groups with the mentor that they most closely identified with. For example several mentors were mothers and were undertaking the course as an off campus student, they suggested that similar students might like to form a group. Students that were interested came together in groups of six to eight students. It was proposed that groups would meet face-to-face several times each semester with an additional lunch organised and hosted by the School for all participant students, mentors and midwifery teaching team. An online site with an open discussion forum for all students and mentors was developed as a means of communication where mentors and students could post questions and have discussion. This was created as one discussion forum so that questions raised by one student could be read by all. Mentors liaised with the Program Director for the Bachelor of Midwifery who was readily available for any issues that arose. It must be noted, that the program was offered to all 1st year students, but was developed so that first-year students could participate voluntarily and engage as much or as little as they chose. Mentors were not expected to follow up on mentees, rather to be available and create opportunities to meet as a group and correspond through email or the online site.

Research design

A survey design was adopted to evaluate the program and to determine whether group peer mentoring enhanced the first-year student experience. It also provided feedback to inform further development of the program. The study utilised a modified version of a questionnaire for mentees administered by the Victorian University to evaluate their nursing peer mentoring program. Changes were made to the wording of the questionnaire and additional questions were added to reflect the specific design of the mentoring program in this project (Milne et al., 2007). The questionnaire asked mentees to rate their experience with the mentoring program as well as a number of potential outcomes such as improved confidence, time management and being prepared for clinical placement. A Likert scale was used with a rating of one to five, one being strongly disagree to five, being strongly agree. Additionally there were open-ended questions for students to provide further comments about the mentoring program, their experience and suggestions for improvements. Examples of the questions used in the mentee questionnaire have been provided in Table 1. The peer mentoring program was offered to students commencing in 2013 and 2014. Students were not required to formally register their

Table 1

Example of questions from the mentee questionnaire.

Participating in the midwifery student peer mentoring has:
1. Helped my understanding about the clinical requirements of this program
2. Assisted me in how I plan and manage my time
3. Increased my motivation to complete the first-year of this program
4. Made me feel confused at times
5. Contributed to a positive student experience

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