



Midwifery Education in Practice

Midwifery students' experiences of learning through the use of written reflections – An interview study

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A B S T R A C T

In an effort to strengthen midwifery students' learning process, written reflections during the students' clinical practice at birth units have been applied. The aim of this study was to examine how students of midwifery experienced the writing of daily reflections on their practice at birthing units. An interview study was carried out using an inductive method with descriptive design. During 2013 ($n = 12$) and 2014 ($n = 7$), respondents were recruited from two cohorts of midwifery students ($n = 19$) at a university in southern Sweden. Narrative interviews were carried out. The interviews were analysed with thematic content analysis. One theme including four categories emerged from the analysis. The theme was “*An educational strategy for the present and the future*”. The four categories were “*Towards personal and professional development*”, “*Reflection requires effort*”, “*Supervisors' commitment*” and “*Clarification of the rationale*”. Daily written reflections are useful for students' personal and professional development during clinical practice/placement. In order for the reflections to be used optimally, students must be given clear instructions on the purpose of their use and be given enough time to write them. Furthermore, supervisors must provide constructive feedback on the students' written reflections.

1. Introduction

Reflective practice is an important component of professional development (Mann et al., 2009; Sandars, 2009; Embo et al., 2015; Chaffey et al., 2012) and can be used as an educational strategy (Miraglia and Asselin, 2015). Professional development can be seen as a transition. A transition is a process that occurs over time and requires a capacity to absorb new knowledge (Meleis et al., 2000). Brunstad et al. (2016) showed that the transition from being a nurse to being a midwifery student is challenging. Reflections may aid students' capacity for critical review of clinical practice and development of their clinical competence. They learn also to evaluate their own level of competence (Levett-Jones, 2007).

Reflection is defined as a capacity to critically analyse personal experiences in order to achieve knowledge and a deeper understanding of situations, which can then be called upon in the future, when similar situations occur (Mann et al., 2009). The reflective process is described by Sandars (2009) as a three stage model of reflection before, under and after an action: planning, doing and reviewing. Another model of reflection is described by Gibbs (1988) and is composed of six areas of reflection; description, feelings, evaluation, analysis, conclusions and action plans. The process also creates an understanding of self, which

can be used to inform future actions (Sandars, 2009).

The pedagogical strategy in the use of reflections is to integrate theory and clinical practice (Mann et al., 2009). Reflection on clinical experiences develops critical thinking, self-understanding and facilitates coping in clinical practice (Craft, 2005). Two recently published reviews showed that reflection is essential for learning and development in medical and nursing practice (Miraglia and Asselin, 2015; Chaffey et al., 2012) and reflection has also been shown to be essential in midwifery practice (Nakielski, 2005; Embo et al., 2015; Persson et al., 2015). Embo et al. (2014) have shown in their study of midwifery students' learning process that immediate reflection on action was more valuable than delayed reflection even though both types are needed. Immediate reflection on action increased insights and highlighted students' strengths, weaknesses and learning needs that in turn increased the students' competency level.

Studies have also underscored the value of supervisors' feedback in encouraging students to reflect (Blåka, 2006; Sandars, 2009; Lake and McInnes, 2012). The amount of feedback given in clinical practice is an important factor for facilitation of learning and professional development (Clynes and Raftery, 2008). According to Hattie and Timperley (2007, p. 86) effective feedback should answer the questions “What are the goals”, “What progress is being made towards the goal” and “What

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activities need to be undertaken for progress". There are several definitions of feedback but common to them all is that feedback is an interactive process aimed at helping learners towards insight into their own performances (Clynes and Raftery, 2008).

By studying midwifery students' written reflections, Persson et al. (2015) have shown that it is possible to follow progression and professional development during the educational process. It is also important to study midwifery students' experiences of daily written reflections on clinical practice. This will provide valuable knowledge for the development of evidence-based education.

The present study is part of a larger project that aims to examine different aspects of the use of reflective writing in midwifery education.

1.1. Objectives

The aim of the present study was to examine how midwifery students experienced the writing of daily reflections on their practice at birthing units.

2. Methods

2.1. Design

This interview study uses an inductive method with descriptive design.

2.2. Settings and participants

At a university in southern Sweden, midwifery students use reflective diaries during their clinical practice at birth units. The diaries are used as an effort to enhance students learning, support progression and professional development but are not used as a tool for grading. The students are asked to structure their reflections according to Gibbs' model of reflection (Gibbs, 1988) which is briefly introduced by the teacher at course introduction. Written instruction about Gibbs' model of reflection is also included in the layout templates for the diaries. Each student practises together with two different supervisors. Supervisors are registered midwives who have had a minimum of two years clinical experience and who have completed a course in clinical supervision. Information about provision of feedback to the students is given during a course information meeting. They are asked to write their feedback under a specific heading on the layout templates. Designated time is not reserved either for students in practice or for their supervisors for the writing of reflections or feedback. Students often write their reflections at home at the end of the day.

Respondents, were recruited from two cohorts of midwifery students ($n = 39$), all females. Criteria for acceptance to Swedish midwifery programs (18 months) are registration as a nurse and a minimum of one year post-graduate clinical experience. Both focus group and individual interviews were carried out. The intention was to use focus groups, but for practical reasons and students' wishes also individual interviews were carried out. Nineteen students in total participated in the study, cohort 2013 ($n = 12$) and 2014 ($n = 7$). Five students selected to be interviewed individually and the remaining students attended one of six focus groups held (see Table 1). New information did not emerged from the analyses of the two last interviews. The students were aged between 27 and 45 years and they had worked as registered nurses between 1 and 16 years prior to commencement of midwifery education.

2.3. Data collection

The students received oral and written information in class by two of the researchers (EP and ME) concerning the study. Willingness to participate was expressed verbally to the researchers and written consent for participation was signed by each individual before the

Table 1

Type of interview, cohort and number of respondents in each interview.

Interviews		Cohort	Respondent
Interview 1	Individual interview	2014	R:1
Interview 2	Individual interview	2014	R:2
Interview 3	Individual interview	2014	R:3
Interview 4	Focus group interview	2013	R:4
			R:5
Interview 5	Focus group interview	2013	R:6
			R:7
Interview 6	Focus group interview	2013	R:8
			R:9
Interview 7	Individual interview	2013	R:10
Interview 8	Focus group interview	2013	R:11
			R:12
			R:13
			R:14
Interview 9	Focus group interview	2014	R:15
			R:16
			R:17
			R:18
Interview 10	Individual interview	2013	R:19

interviews.

Nineteen students accepted the invitation to participate. When consent was sought, the students had finished their last clinical placement and had only a few weeks left before graduation and this time was spent working on their master-theses. Therefore limited state of dependence was considered to exist between the students and the authors who performed the interviews (EP and ME). Seventeen students were interviewed at the university and the remaining two at a hospital clinic, according to the students' preferences. Duration of the interviews was 30–60 min. The interviews were conducted by the authors, either EP or ME. Every interview was audio recorded and transcribed verbatim, in full by the researcher who had not conducted the interview, either EP or ME. In this paper, citations are provided with a respondent number. Open interviews were performed, in accordance with the narrative interview method, where the interview takes the form of a conversation with the purpose of generating rich descriptions (Polit and Beck, 2012). Each interview started with an open question "How did you experience writing daily reflections on practice at the delivery unit?"

2.4. Data analyses

In accordance with qualitative thematic content analysis (Burnard et al., 2008), each transcribed interview was initially read thoroughly by two of the authors and notes were taken in order to capture the character of the text. Notes were written and the transcripts were re-read and coded in order to discern all aspects of the content in the method of open coding. QSR International's NVivo 10 Software was used to store and sort data to assist with coding. This process resulted in sub-categories, which later in the analysis were amalgamated into categories. In order to validate the analysis all authors were involved. Quotations from the transcribed text were chosen for each category.

2.5. Ethical considerations

The study was planned and executed in accordance with the ethical principles drawn up in the Declaration of Helsinki (World Medical Association, 2013). The perspective of the analysis is pedagogical and therefore has no direct bearing on patient care. Swedish ethical regulations do not require ethical clearance for research of this kind. There were no means of identification of any individual participant since a coding system was used. It was the intention of the authors to examine the usefulness of the didactic method described in this study and in that way attempt to provide information regarding evidence for the use of reflective writing. This evaluation may be beneficial to future students

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