

STUDENT NURSES' PERCEPTION OF THE CLINICAL MIDWIFERY EXPERIENCE AS A LEARNING ENVIRONMENT

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Abstract

The student nurse may have a different perception of her learning environment from that which the instructor intended.

The purpose of the study was to determine the perception of student nurses of clinical midwifery experience as a learning milieu. Student nurses in their third and fourth year at a nursing college in Transvaal were involved in the research. A literature study regarding factors that can influence clinical learning of student nurses in the midwifery units was done.

Questionnaires were used to collect data regarding personal information, the learning environment, and problems regarding clinical skills. Data were analysed by means of a SAS computer programme.

Certain problem areas, for example the need for clinical lecturers to attend units on a more regular basis, as well as the more negative attitude of fourth year respondents compared to third years, were indicated.

The necessary recommendations were made and reported to the nursing college concerned.

Opsomming

Die studentverpleegkundige kan 'n totaal ander beeld van haar onderrig in die kliniese verloskundige praktyk hê as wat die dosent vir haar daargestel het.

Die doel van die ondersoek was om vas te stel watter persepsie die studentverpleegkundiges van hul kliniese verloskundige ervaringsveld as leermilieu het.

Studentverpleegkundiges in die derde- en vierdestudiejaar by 'n verpleegkollege in Transvaal is vir die studie betrek.

'n Literatuurstudie rakende die faktore wat studentverpleegkundiges se persepsie van leer in die kliniese verloskundige eenhede kan beïnvloed, is gedoen.

Vraelyste is gebruik om gegewens betreffende persoonlike inligting, die leerklimaat, asook probleme met kliniese vaardighede, in te samel. Gegewens is met behulp van die rekenaar se SAS-program ontleed.

Sekere gegewens soos die behoefte aan 'n groter teenwoordigheid van kliniese dosente in die kliniese verloskundige eenhede, asook die meer negatiewe gesindheid van vierdejaarstudente in vergelyking met derdejaarstudente, is uitgewys. Die nodige aanbevelings is gemaak en aan die betrokke kollege oorgedra.

variety of caring experiences during a relatively short period of her training. Events during the antenatal, labour, puerperal and postnatal periods may occur in ways unforeseen and unplanned by the nursing and teaching staff. It is the task of the nurse educator to provide the student nurse with the professional knowledge to cope with any situation within the scope of her practice.

Clinical experience according to Windsor (1987:507) is a very important aspect of the students' professional nursing skill. Students recognise the application of nursing skills to practice as being a major function and important component of their clinical experience.

Learning situations may be unique and incapable of providing repetitive learning opportunities. Thus the nurse educator must be alert to identify suitable learning opportunities for student nurses (Bergman, 1990:33).

MOTIVATION FOR THE STUDY

A major part of the students' learning experiences occur in the clinical situation. Clinical midwifery training is diverse because it extends to four different midwifery areas - the antenatal clinic, the labour ward, the puerperal ward and the postnatal clinic. It is crucially important that the education and training of the student enables her to become competent clinically in all four spheres. However, the student nurse may have totally different perceptions of the learning environment from those which the instructor intended her to have. Realistic clinical midwifery training depends on the perception of the student, because it determines the students' attitude towards the learning environment. This attitude, in turn, influences the learning environment.

Perception is "whatever the experiencing person says it is, existing whenever he says it does" (Halfens, 1990:43)

INTRODUCTION

The clinical midwifery unit in the hospital is where a student nurse undergoes a

OBJECTIVES OF THE STUDY

The objectives for this study were to determine:

- What perceptions student nurses have of the clinical midwifery experience as a learning environment;
- Whether the academic year of the student influences her perception of the clinical midwifery experience;
- What the students' perceptions of her clinical skills in midwifery practice are.

LITERATURE REVIEW

An extensive literature study was done to identify potential factors which may influence the student nurses' perceptions of the clinical midwifery experience as a learning environment. The following relevant terms were included

Motivation to learn, accompaniment and interpersonal factors

- The interaction between members of the clinical team determines the effectiveness of the learning programme, as well as the students' perception of the active learning experience (Darcy, 1975:59);
- Bergman (1990:30) found that students regarded the relationship between clinical instructors and students as being more important than acquiring clinical skills;
- Windsor (1987:154) found that the *"instructor emerged as an important variable in the clinical setting"*;
- Hammer (1985:281) writes that *"a display of genuine respect for the student is a prelude to the development of a healthy professional image, and conscious efforts should be made to facilitate the students' appreciation of himself"*.

Educational strategies

According to van Hoozer (1987:79) educational strategies are used to facilitate clinical learning opportunities interdependently with:

- educational objectives;
- nature and educational level of the student;
- available learning resources;
- learning contents.

Beeman (1988:370) recommended that educational strategies be planned in such a way that they stimulate independence, give direction, and serve as useful and practical sources of knowledge.

Mogan (1983:4-13) found that students' perceptions of their clinical education is influenced by the method used by the instructor for transfer of this knowledge to the student.

Evaluation

Venter (1982:51) reported that the following factors hindered evaluation:

- poor measuring instruments;
- inaccurate measurement;
- unsatisfactory feedback, including derogatory remarks when the student fails to perform satisfactorily;
- inability to ensure the patients' safety;
- inability of a student to improve on previous poor performances.

METHODOLOGY

The survey method was used to collect data. The research instrument was classified into nine components including:

- Geographical data;
- The learning climate;
- Learning objectives;
- Clinical accompaniment;
- Creativity and the development of an own identity;
- Educational strategies used in clinical teaching;
- Clinical evaluation;
- Interpersonal relations;
- Students' perceptions of their own clinical competencies.

A questionnaire was compiled consisting of questions to be answered on a four point scale scored as follows:-

- 4 = always
- 3 = often
- 2 = seldom
- 1 = never

The questionnaire consisted of ten pages, and would take the students approximately thirty minutes to fill in. Respondents would remain anonymous.

Third and fourth year student nurses of one specific nursing college were selected for the survey. These students were registered for the course leading to

registration as a professional nurse (general, psychiatry and community) and midwife as prescribed by regulation 425 of 22 February 1985 (as amended). Considering that only twenty-eight fourth year and nineteen third year students were enrolled in the college under investigation, the researcher decided to make use of students of another college for the pilot study.

The pilot study

Ten student nurses from another hospital (five third years and five fourth years) were selected for the pilot study. Students experienced little problem with interpretation of the research instrument. The required changes were implemented prior to utilisation in the main study.

The survey

The survey method was used to collect data. A computer coded questionnaire were distributed during one period to 47 student nurses and was completed and returned by the same number of students giving a hundred percent response rate. Participation was voluntary, anonymous and confidential. These respondents included:

- 28 third years students;
- 19 fourth year students

Some examples of the type of questions asked are:-

The learning environment

Is the learning environment pleasant and relaxed?

Ante-natal clinic
Labour ward
Puerperium
Post-natal clinic

Learning objectives

Do you understand the objectives that you have to master?

Ante-natal clinic
Labour ward
Puerperium
Post-natal clinic

Clinical accompaniment

Do you feel that clinical instructors understand your learning needs?

Ante-natal clinic
 Labour ward
 Puerperium
 Post-natal clinic

Creativity and the development of an own identity

Do the nursing staff encourage you to use your own initiative in the units?

Ante-natal clinic
 Labour ward
 Puerperium
 Post-natal clinic

Learning strategies

Do clinical lecturers use the following teaching strategies?

Key:
 Yes = 1
 No = 2

Demonstration
 Ward rounds
 Case studies
 Roleplay
 Nursing process
 Simulation
 Others (specify)

Analysing and interpretation of data

Questionnaires were coded on punchcards and processed by statistical analysis. Chi square was used as a test of significance, but as a result of the small number of participants could not be regarded as being a valid test.

FINDINGS

Biographical information

- The respondents were 23 years and younger, and only one respondent had children. The relation between age and having children could thus not represent a specific perception of students.
- Clinical nursing staff in the labour and puerperal wards (according to respondents) made greater effort to create a learning environment conducive to student nurses' learning needs than nursing staff in the ante- and post-natal clinics.

- Fourth year students displayed a more negative perception of the clinical midwifery experience as a learning milieu than did third year students.
- Respondents, especially the fourth year students, had a more negative perception of the learning environment in the ante- and post-natal clinics, and more positive perceptions in the labour- and puerperal wards.

- According to 14 (93.33%) of the 15 fourth year students and 8 (66.67%) of the 12 third years who had had opportunity to work in these units, clinical instructors seldom were involved in physical care of women in the antenatal unit.

- Respondents had more positive perception of professional nurses than of their clinical instructors.

- Respondents valued professional nurses as better role models than clinical instructors. Windsor (1987:512) and Barr (1980:18) emphasized the importance of a pleasant atmosphere in the learning environment.

Learning objectives

- Respondents perceived learning objectives in the different units as being realistic.
- Learning objectives were achievable according to most students.
- Clinical instruction was relevant to classroom instruction.

These findings were positive when compared with those of Coles (1981:48) who found that 56.2 percent of students indicated that a discrepancy existed between theory and practice.

Clinical accompaniment

- According to third years, clinical instructors had insight into their learning needs, but fourth years did not share this opinion.
- Doctors were the only other members of the health team who were involved in clinical instruction.
- Respondents felt negative about equal allocation of learning opportunities by the nursing staff in the units; the conducting of deliveries in the labour ward was given as an example of this.

- Respondents indicated that nursing staff made better use of learning opportunities than clinical instructors.
- Clinical instructors are seldom available when needed by students.
- Nursing assistants were most helpful in mastering clinical competencies and were even more helpful than the ward registered staff. This was the perception of seven of twelve of third years and five (33.33) (n=15) of fourth years. O'Shea (1979:414) found that junior students experienced the willingness of clinical instructors to help in clinical as an important learning facilitator, and the latter findings could cause concern.

Creativity and the development of own identity

- Students were involved in nursing care programmes and encouraged to use own initiative.

Educational strategies

- The demonstration was used most often, and the nursing round used least. This was the perception of 24 of 28 third years and 14 of 19 fourth year students.

Evaluation

- Students were notified in advance that evaluation would take place and had sufficient time to practice their clinical skills.
- Respondents in both third and fourth year groups were positive about feedback received after evaluation.

Johnson (1988:373) found that clinical evaluation is important for the instructor to determine the competence of the students in the problem solving approach, as well as the psychomotor and communication levels.

Feedback is necessary for remedial practice.

Interpersonal relations and stress factors

- Respondents in both groups perceived that senior professional nurses act as good role models in staff relations, but that professional nurses in the different units lacked consideration for the personal needs of students.
- Eleven (n=18) fourth year respondents indicated that they

received the greatest emotional support from professional nurses, while 17 (n=28) third years received the greatest support from their peer group.

Problems with clinical skills

The respondents encountered few problems with clinical skills. These included:

- clinical competencies during complications;
- determination of fetal growth;
- nine (32.14%) third years had problems in managing patients with severe pain;
- skills in the post-natal check up, family planning as well as feeding and bonding problems.

Most students enjoyed their midwifery clinical practice.

CONCLUSION

The conclusions based on this study relate only to the perceptions revealed by the respondents, and do not necessarily represent the reality. These perceptions, however, represent the reality as experienced by the respondents.

The learning environment

- The learning environment was often pleasant and relaxing for students.
- Clinical instructors were not involved in the physical activities of the different units. This hindered students in formulating clear role model concepts.

Learning objectives

- Learning objectives were well explained and achievable.

Clinical accompaniment

- Fourth year students were, contrary to expectations, generally more negative about their clinical learning experience than third year students.

The question arose whether third years actually obtained more clinical attention (for example to acquire the minimum number of deliveries required) than the fourth year students. The fourth year students were prepared in the administrative and educational roles to be fulfilled as a registered nurse.

- Respondents had more negative perceptions towards clinical instructors than professional nurses.
- Clinical instructors were insufficiently involved in the units. This can be related to the negative perceptions of clinical instructors.
- Fourth year respondents valued peer group support. Third years students were more dependant on the professional nurses for such support.
- According to both third and fourth year groups, clinical instructors were not consistent in delegating equal clinical opportunities to all students.

Creativity and the development of own identity

- Respondents were actively involved in nursing rounds and are encouraged to use their own initiative.

Evaluation

- Respondents were positive about clinical midwifery evaluation. Most students experienced stress when evaluated, but this could be regarded as normal.

Interpersonal relations and stress factors

- There was according to students, a lack of understanding of the personal problems of students.

Problems regarding clinical competencies

- Relatively few problems were experienced. It seems that the problems that students experienced in this regard will be overcome when relevant experience is attained.

It can be assumed that the respondents regard themselves as being competent to nurse both mother and baby within the scope of their practice.

LIMITATIONS OF THE STUDY

Because the study was limited to one college only results cannot be generalised to all colleges.

RECOMMENDATIONS

The most important problem identified concerned clinical accompaniment. A more positive relationship between the clinical instructor and the student would improve this situation. It can be accomplished by:

- the presence and actual involvement of the clinical instructor in the units;
- the availability of the instructor in clinical units;
- consideration of the students' learning needs especially in the ante- and post-natal units. The fact that fourth year students indicated that they still experience difficulty in measuring foetal growth confirms this perception;
- priority allocation of learning opportunities must be discussed with students in a group in order to avoid dissatisfaction;
- more empathy needs to be shown to students' personal problems;
- boosting the morale of fourth years; it must be emphasized to them that training does not cease once the minimum number of deliveries have been carried out.

REFERENCES

- BARR, F. 1980. Are your students positive about their experience in the clinical area? The Canadian Nurse. (October): 48-50.
- BEEAMAN, P. 1988. RN's perceptions of their Baccalureate programs: meeting their adult learning needs. Journal of Nursing education 27, 8; 364-370.
- BERGMAN, K. 1990. Faculty perceptions of effective clinical teachers. Journal of Professional Nursing 6, 1, (January-February): 33-44.
- COLES, J. 1981. Nursing students' perceptions of teaching in the clinical area. The Australian Nurses' Journal 11, 1: 47-49.
- DARCY, P.T. 1975. Dynamic aspects in clinical nursing. Nursing Mirror 141, 4: 59.
- HALFENS, R. 1990. Determinants of pain assessment by nurses. International Journal of Nurses. 27, 1: 43-49.
- HAMMER, R.M. & TUFTS, M.A. 1985. Nurses' self-image - Nursing educationist responsibility. Journal of Nursing Education. 27, 8 (October): 280-283.
- JOHNSON, G. 1988. Clinical exam: a summative tool. Journal of Nursing Education 27, 8, (October): 373-374.

MOGAN, J. & KNOX, J.E. 1983. Students' perceptions of clinical teaching. Nursing Papers. 15, 1: 4-13.

PRATT, D. 1976. Perception and learning: some basic considerations. British Journal of Educational Technology. 7, 3: (October): 41-46.

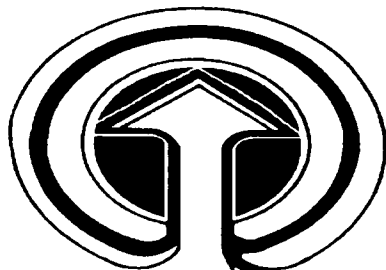
VAN HOOZER, H.L. 1987. The teaching process - theory and practice

in nursing. Connecticut: Appleton-Century-Crofts.

VENTER, A.M. 1982. Evaluering van gesindheid in kliniese onderrig. Curationis. 6, 1: 33-37.

WINDSOR, A. 1987. Nursings' perceptions of clinical experience. Journal of Nursing Education 26, 4: 505-513.

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VERPLEEGONDERWYS-VERENIGING NURSING EDUCATION ASSOCIATION

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Dear Nurse Researchers,

Greetings from the new management committee of the Society. We look forward to a happy and productive two year term. The following people were elected to office in March 1993:

Chairperson: Vicki Pinkney-Atkinson (012-47-6101)

Vice-Chairperson: Anita van der Merwe (031-816-2498)

Secretary: Magda Mulder (051-401-2604)

Treasurer: Marie Poeggenpoel (011-489-2711)

Special Projects: Ina Treadwell (012-329-1111 x 3217)

We hope that you will make use of the phone numbers to contact us with regard to research matters.

Planning for the decentralised research groups is continuing. These **Research Interest Groups (RIGS)** will be open to all members of the Society. The project is co-ordinated by Ina Treadwell, so if you are interested and want to know more please contact her. It is hoped that the RIGS will positively influence the quality and quantity of nursing research produced in South Africa. Each RIG will consist of about 8 members and will be chaired by an experienced researcher.

HOT OFF THE PRESS: The 1994 Annual Conference will be held in March at a Venue yet to be decided. The theme of the conference will be **ASSESSING THE COMMUNITY'S HEALTH NEEDS**. We hope to see you there.

Happy researching,

VICKI PINKNEY-ATKINSON