



MIDIRS Search Pack

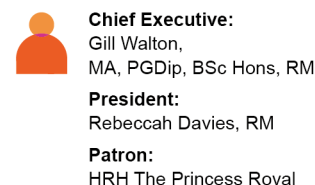
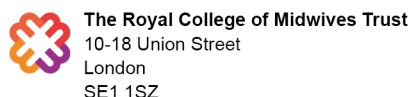
Search Pack M26

Student midwives

Their experiences of being a student, articles written by students about their training. Excludes assessment unless written from a student's point of view. Contains records from 2005 onwards; for earlier records, please see search pack M26A.

Date created: 09/19/2024

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M26 - Student midwives

(783)

2024-11315

Employment: Students Midwives [written answer]. Scottish Parliament (2024), Official Report Written question S6W-29518, 3 September 2024

Neil Gray responds to a written question from Tim Eagle to the Scottish Government, regarding what its response is to the Royal College of Midwives' reported statement that the current number of student midwives due to graduate in 2024 who have not been offered posts could result in an estimated £12 million of public money having been spent on training midwives who do not end up in employment. (JSM)

Full URL: <https://www.parliament.scot/chamber-and-committees/questions-and-answers/question?ref=S6W-29518>

2024-11304

State of the UK midwifery student finance. Royal College of Midwives (RCM) (2024), September 2024. 9 pages

Report published by the Royal College of Midwives calling for action on the following recommendations: Maintenance loans for student midwives that would be forgiven after three years of service in the NHS, specific to the country in which they studied.

Financial support that increases by inflation.

Benefit entitlements should be preserved, so that the vocational burden is not borne by the whole family.

The cost of student placements, which can involve high travel costs, is reimbursed promptly.

Abolition of tuition fees for student midwives in England, bringing it in line with the other nations. (Author, edited)

Full URL: https://www.rcm.org.uk/media/7519/rcm_state-of-uk-midwifery-student-finance-report.pdf

2024-11219

Coaching models to support pre-registration midwifery education in clinical practice. Yearley C (2024), MIDIRS Midwifery Digest vol 34, no 3, September 2024, pp 212-214

The aim of this study is to undertake a national scoping exercise to explore the use of coaching models to support pre-registration midwifery education, how they can be developed and implemented in practice with the aim of providing a practice learning environment for students to benefit from peer-supported learning, underpinned by high-quality coaching and supervision. (Author, edited)

2024-11044

Clinical assessor's experiences of assessing undergraduate nursing and midwifery students who underperform on clinical placement: A qualitative systematic review and meta-summary. O Sullivan G, Hegarty J, Landers M, et al (2024), Nurse Education Today vol 141, October 2024, 106316

Aim

To summarise the qualitative evidence exploring the clinical assessor's experience of assessing undergraduate nursing and midwifery students who underperform on clinical placement.

Design

A qualitative systematic review and meta-summary was undertaken.

Data source

Database searches included CINAHL Plus with full text; Academic Search Complete; MEDLINE; PsycARTICLES; PsychINFO; Social Sciences Full text; SocINDEX with Full Text; ERIC; Pubmed; Scopus and Web of Science.

Review method

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Included studies were appraised using the CASP (Critical Appraisal Skills Programme) tool. A meta-summary was conducted using Sandelowski & Barroso's method.

Results

The review included 18 studies reported across 25 papers. Eight themes and 37 thematic sentences were created from 403 extracted findings.

Conclusion

The management of underperformance on clinical placement by undergraduate nursing and midwifery students presents a challenge for those nurses and midwives, working on the frontline of patient care, who also take on the role of clinical assessor. Addressing these challenges is essential to support the assessor and the student. Sharing of the decision making with a colleague when there is evidence of underperformance could address many of the difficulties experienced by the clinical assessor. (Author)

2024-11043

Undergraduate midwifery students' experiential learning of perinatal bereavement care: A qualitative analysis. Zou Y, Lan Q, Chen L, et al (2024), Nurse Education Today vol 141, October 2024, 106324

Background

It is widely acknowledged that midwives are essential in providing care for mothers experiencing perinatal death. However, midwifery students lack the knowledge and skills needed to deal with perinatal death, and. There is limited research on perinatal bereavement care training for midwifery students.

Aim

To investigate undergraduate midwifery students' experiential learning of perinatal bereavement care and serve as a reference for future perinatal bereavement care teaching and training.

Design

Qualitative descriptive design.

Setting

University in Guangzhou, China.

Participants

Undergraduate midwifery students at a university in Guangzhou, China.

Method

This research was conducted at a university in Guangzhou, China. The participants were recruited using purposeful sampling. Semi-structured, in-depth interviews were conducted with 11 midwifery students who participated in perinatal bereavement care training from May to June 2023. The Colalizzi 7-step data analysis method was used for data analysis.

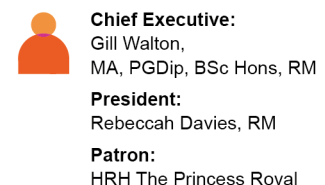
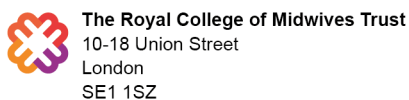
Results

From the data, five themes emerged: 1) immersive experience of perinatal bereavement care, 2) formation of perspectives on perinatal bereavement care, 3) clarification of the service boundaries and internalization of the professional service spirit, 4) emotional impact and coping strategies, and 5) factors influencing practice optimization.

Conclusions

Experiential learning is an effective teaching strategy. However, participants continued to feel unprepared to provide perinatal bereavement care. Implementing relevant training, disseminating perinatal bereavement care knowledge and skills, and enhancing the ability of midwifery students to manage and cope with the psychological impact of

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2024-10816

Midwifery Students' Experiences of Bias in the Clinical Setting: Prevalence, Types, and Impact. Loomis H, Hackley B, Alexander-Delpech P, et al (2024), *Journal of Midwifery & Women's Health* 7 August 2024, online

Introduction

Exposure to bias in clinical learning environments may undermine students' confidence, cause emotional harm, impede learning, and potentially delay graduation. However, little is known about the prevalence of bias experienced by midwifery students in the United States. This cross-sectional, descriptive study aimed to quantify clinical midwifery students' experiences of bias based on 7 self-identified characteristics (gender identity, race or ethnicity, body size, age, sexual orientation, religion, and occupational background). Additionally, this research explored the impact of bias on student well-being, learning, and professional commitment.

Methods

The survey consisted of 39 items addressing (1) prevalence and types of bias, (2) emotional impact and influence on clinical learning, (3) ways students coped, (4) whether anyone spoke up at the time bias occurred, (5) whether students reported bias to faculty, and (6) impact of bias on commitment to midwifery. The survey was distributed to midwifery students and recent graduates in 2022 via American College of Nurse-Midwives email discussion lists and social media. Participants were eligible if they were in a clinical rotation in an Accreditation Commission for Midwifery Education-accredited midwifery program between 2019 and 2022.

Results

Surveys were returned by 383 participants, with 301 meeting inclusion criteria. Most participants (66.5%) reported personally experiencing or witnessing bias against at least 1 of 7 personal characteristics. The most commonly reported biases were related to gender, occupational background, age, and race or ethnicity. Only half of the participants reported these occurrences to someone with academic authority, and nearly a third considered withdrawing from their educational programs.

Discussion

In this study bias was common and significantly impacted students. These results underscore the need for creative and bold interventions at personal, educational, and institutional levels to prevent and mitigate bias. Safeguarding clinical learning environments will enable students to thrive, graduate with confidence and competence, and thereby contribute to the diversification and strengthening of the midwifery profession. (Author)

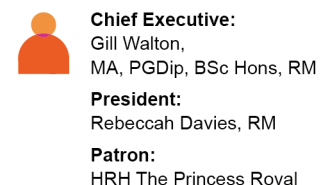
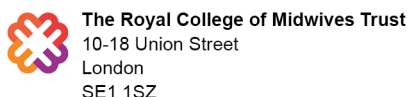
Full URL: <https://doi.org/10.1111/jmwh.13680>

2024-10815

Thirty Years of Midwifery Education in the Rural and Diverse State of New Mexico. Kivlighan KT, Ortiz F, Migliaccio L, et al (2024), *Journal of Midwifery & Women's Health* 20 August 2024, online

The purpose of this article is to discuss the evolution of the University of New Mexico (UNM) Nurse-Midwifery Education Program, its impact on New Mexico communities, and the vision moving forward for the program in a rural and culturally diverse state. New Mexico has a rich history of community-based midwifery and the UNM Nurse-Midwifery Education Program, founded in 1991, is rooted in this tradition. Graduates are prepared to practice in rural and underserved communities, advance birth equity, and decrease perinatal health disparities. Faculty have advanced the program mission to improve the health and well-being of New Mexico families through diversifying the midwifery workforce, growing community collaboration, and engaging in research and scholarship activities aimed at promoting access to care. Program faculty recognize the critical need to address factors underpinning the rising maternal morbidity and mortality crisis, including rurality, poverty, and structural racism. These efforts have yielded positive results, with 60% of program graduates serving New Mexico communities and increasingly diverse midwifery student cohorts (70% of currently enrolled students). Efforts to support midwifery student success are bolstered

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through a recently awarded Health Resources and Services Administration Maternity Care Nursing Workforce Expansion grant. Through such endeavors, the program will continue to strive toward social justice and human dignity.

(Author)

2024-10641

Guide to the UNICEF UK Baby Friendly Initiative University Standards. 2nd edition. The Baby Friendly Initiative. UNICEF UK (2019), July 2019. 24 pages

Welcome to the Guide to the Unicef UK Baby Friendly Initiative university standards. This document will guide you through the staged Baby Friendly accreditation programme for pre-registration midwifery and health visiting university programmes. The Baby Friendly university standards and learning outcomes provide a template for universities to give their students a strong foundation of knowledge in supporting all mothers with feeding and helping parents to build a close and loving relationship with their baby. The following chapters will go through the university standards and learning outcomes, and provide guidance on how to put these into practice and achieve Baby Friendly university accreditation. (Author)

Full URL: <https://www.unicef.org.uk/babyfriendly/wp-content/uploads/sites/2/2019/07/Guide-to-the-Unicef-UK-Baby-Friendly-Initiative-University-Standards.pdf>

2024-10116

Development of neonatal Apgar scoring training program utilizing contactless hand tracking in immersive virtual reality. Yang SY, Oh YH (2024), Nurse Education Today vol 140, September 2024, 106294

Background

The rapid and accurate assessment of neonatal asphyxia is critical to preventing potentially fatal outcomes. Therefore, nursing students must acquire the skills to assess newborn conditions immediately after birth and implement appropriate interventions. Virtual reality (VR) simulation education has emerged as a promising tool for nursing education, offering repetitive and customizable clinical training while ensuring patient safety and overcoming spatiotemporal limitations.

Aim

This study investigated the effects of a contactless hand-tracking-based immersive VR neonatal Apgar scoring program, adapted from experiential learning theory.

Design

A non-randomized controlled trial with a pre-post-test, quasi-experimental design was conducted.

Settings

The study was conducted at two nursing schools from July to October 2023.

Participants

Participants comprised nursing students holding bachelor's degrees in nursing, with three or four years of experience and successful completion of a neonatal nursing theory course. Additionally, individuals with at least six months of experience working in a neonatal ward or delivery room before enrolling in nursing school were eligible.

Methods

The participants were divided into three groups: the VR group (n = 27) received contactless hand-tracking-based immersive VR neonatal Apgar scoring training; the simulation group (n = 28) received face-to-face Apgar scoring simulation training; and the control group (n = 26) received instruction on the Apgar scoring criteria. Changes in scores among the VR, simulation, and control groups were statistically compared using ANOVA with SPSS-WIN 27.0.

Results

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The VR group exhibited significant improvements in knowledge, learning satisfaction, self-confidence, immersion, and motivation compared to the simulation and control groups. Moreover, satisfaction was significantly higher in the VR group than in the simulation group.

Conclusions

The hand-tracking-based immersive VR neonatal Apgar scoring program represents an innovative and effective educational tool, prioritizing the privacy and rights of mothers and infants. It can potentially replace traditional delivery-room clinical training, which is observation-based and limited. (Author)

2024-10114

Learning disability awareness training for undergraduate midwifery students: Multi-method evaluation of a co-produced and co-delivered educational intervention in England. Cox A, Tobutt D, Harris J, et al (2024), Nurse Education Today vol 140, September 2024, 106289

Background

Midwives lack the confidence and competence to identify and support people with learning disabilities, putting this population at risk of inequitable maternity care.

Objectives

To co-produce, co-deliver and evaluate maternity focused learning disability awareness training for student midwives, in collaboration with experts-by-experience (people with learning disabilities).

Design

Multi-methods study evaluating the impact and acceptability of learning disability awareness training.

Settings

University in south-east England, UK.

Participants

83 midwifery students and 7 experts-by-experience.

Methods

Midwifery students completed pre-post training surveys and a follow-up survey 3 months post training to substantiate longer-term impact. Experts-by-experience took part in qualitative interviews post training.

Results

Student-reported learning disability awareness was significantly higher across all domains post training and sustained at follow up. Students reported the most notable aspect of training was learning with and from people with learning disabilities. Three inter-related themes were constructed from interviews with experts-by-experience: reasonable adjustments to training and research processes; a positive social, emotional and learning experience; and perceptions of impact.

Conclusions

Findings from this study suggest that co-producing and co-delivering resources and education to an undergraduate midwifery workforce with people with lived experience, can have a profound impact on students and is also a positive experience for people with learning disabilities. The co-produced resources used in this training are free and accessible [

<https://www.surrey.ac.uk/togetherproject>

]. Further evaluation will explore acceptability and perceived impact of training and resources on other healthcare professionals working with maternity services. (Author)

Full URL: <https://doi.org/10.1016/j.nedt.2024.106289>

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2024-10112

Investigation of midwifery students' opinions on the digital storytelling method in midwifery education and assessment of their digital stories. Reyhan FA, Dağlı E (2024), Nurse Education Today vol 140, September 2024, 106262

Background

In today's digitalized world the use of innovative technologies in education systems is very important. In midwifery education, where learning by researching, applying, and experiencing is important, research on the effects of digital storytelling, which involves the use of innovative technology, is limited.

Aim

The aim of this study was to investigate midwifery students' views on the digital storytelling method in midwifery education and to assess the digital stories they produced.

Design

This is a qualitative descriptive study.

Participants

The research was conducted with senior students of the midwifery department of a state university. A total of 26 students participated in in-depth, semi-structured interviews.

Methods

Interview data were evaluated using content analysis and the Digital Storytelling Evaluation Scale was used to evaluate the digital stories produced by the students.

Findings

Students' opinions about the digital storytelling method in midwifery education reflected three main themes: "benefits of the digital storytelling method," "difficulties in preparing digital stories," and "the place of digital storytelling technique in midwifery education." At commencement, students did not think that the digital storytelling method would have an effect, but they found this method quite effective. The digital stories prepared by the students were evaluated by the researchers between 28 and 36 points and it was determined that the content of the digital stories was sufficient.

Conclusion

Students reported that the digital storytelling method was very effective, encouraged creativity and supported learning through fun activities. However, they also stated that this method was time-consuming and they had difficulties. It is recommended that the use of this innovative teaching method in midwifery education should be expanded and its effect should be evaluated. (Author)

2024-10109

A survey of students' experiences of returning to midwifery studies after maternity leave: A pilot survey. McNeill L, Jefford E, Gray M, et al (2024), Nurse Education in Practice vol 79, August 2024, 104073

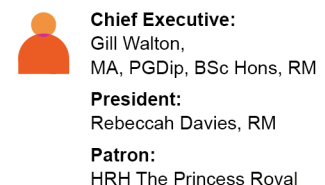
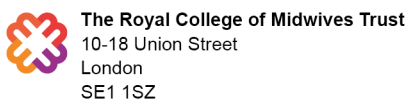
Aim

To identify the barriers and facilitators having an impact on the progression and completion of studies for students who give birth during their midwifery program.

Background

Balancing the demands of pregnancy and new motherhood with the rigorous academic requirements of a tertiary-level midwifery program is challenging for students wishing to progress and complete their studies. Understanding the barriers and facilitators students face when resuming midwifery studies following birth can assist

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universities in providing educational environments that support students in achieving their midwifery education.

Design

Social media online Qualtrics survey with closed and open questions.

Method

Participants were Australian midwifery students who gave birth and returned to their midwifery studies within the past 5 years. Responses from 35 students were descriptively analysed.

Results

For students who commenced pregnancy during their midwifery degree, 40 % chose to take leave from their studies at term (37–40 weeks gestation) or continue their studies without leave. Almost half of the students (n=17) chose to return to their studies before six weeks post birth (68 % (n=24) opting for a part-time pathway). Most of the childcare was undertaken by the student's partner (n=9) or other family members (n=8). Work integrated learning, rostering of shifts and being on call for Continuity of Care Experience relationships accounted for the most significant number (n=19) of responses when identifying barriers to resuming midwifery studies.

Conclusions

The greatest barrier for students is work integrated learning while juggling the transition to parenthood. Universities must work closely with maternity services to support students in completing their studies. (Author)

Full URL: <https://doi.org/10.1016/j.nepr.2024.104073>

2024-09804

Education of postpartum hemorrhage management clinical skills among midwifery students in Malawi: A qualitative study. Kabondo C, Tjoflåt I, Furskog-Risa EC, et al (2024), *Midwifery* vol 136, September 2024, 104106

Background

Unskilled health professionals in healthcare systems are contributing to the high numbers of maternal mortality in Malawi. It is therefore essential that midwifery students acquire postpartum hemorrhage management clinical skills, especially in view of high maternal mortality, with postpartum hemorrhage being the leading cause. However, there is limited evidence on how the teaching is conducted with regard to students' learning of postpartum hemorrhage management clinical skills.

Purpose

This study aimed to describe the current teaching of postpartum hemorrhage management clinical skills in undergraduate nursing and midwifery program in Malawi.

Methods

The study applied a qualitative exploratory descriptive design. Data were collected through ten individual interviews with lecturers and three focus group discussions with twenty-four students in a midwifery education program in Malawi. The data were analyzed using thematic analysis.

Results

Two themes emerged from the data analysis: (1) there are various teaching and learning approaches for postpartum hemorrhage management in use and (2) unpreparedness of midwifery students in postpartum hemorrhage management for patient care.

Conclusion

The present study demonstrated that teaching of postpartum hemorrhage management clinical skills in an undergraduate nursing and midwifery programme in Malawi focuses on theoretical knowledge rather than practical skills, leaving midwifery students unprepared for postpartum hemorrhage management during clinical practice. The

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findings from the present study may provide knowledge guiding revision of the curriculum for the undergraduate nursing and midwifery programme in Malawi to consider global standards of midwifery education; enhance the lecturer to student ratio to provide the students with appropriate supervision; and to employ innovative teaching and learning strategies that promote peer education and skills practice among midwifery students. In addition, to conduct more research related to various teaching approaches in nursing and midwifery educational programs and among qualified midwives in Malawi.

Statement of significance

Postpartum hemorrhage management education in undergraduate nursing and midwifery programme in Malawi focuses more on theory than clinical skills. Improving midwifery students' acquisition of postpartum hemorrhage management clinical skills is needed to ultimately help lower Malawi's maternal mortality ratio. (Author)

2024-09556

Breastfeeding knowledge assessment tools among nursing and midwifery students: a systematic review. Hamdoune M, Jounaidi K (2024), British Journal of Midwifery vol 32, no 8, August 2024, pp 432–439

Background/Aims

Training nursing and midwifery students is essential to support breastfeeding reinforcement plans. Various scales have been developed to assess knowledge acquired during training. This study was conducted to explore these instruments.

Methods

A systematic review of online databases (Scopus, Web of Science, Science-Direct, Cochrane Library and PubMed) was performed. Studies published in English from 2013 were included.

Results

Five studies that used validated instruments were included in the review. An additional scale, the breastfeeding knowledge assessment form, was identified but had only been tested once. Most tools were designed to assess mothers' knowledge, and no instruments were developed for nursing and midwifery students. Factors that influenced knowledge and its acquisition among nursing and midwifery students included the lack of training courses on breastfeeding for undergraduate students.

Conclusions

There is a lack of such instruments specifically designed for nursing and midwifery students. A comprehensive training module should be included in undergraduate curricula based on WHO and the UNICEF educational requirements.

(Author)

2024-09555

Midwifery students' experiences of learning to be 'with woman': a scoping review. Guerin A, Geraghty S, McChlery S, et al (2024), British Journal of Midwifery vol 32, no 8, August 2024, pp 422–431

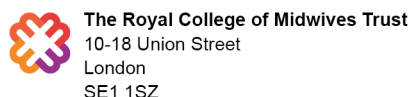
Background/Aims

Being 'with woman' is a fundamental concept of midwifery and profoundly impacts maternal and infant wellbeing and outcomes. Understanding student midwives' experiences is vital in shaping learning strategies for positive and effective student-centred learning outcomes. This scoping review's aims were to gain meaningful insight into existing literature on students' experiences of learning to be 'with woman'.

Methods

The scoping review searched the CINAHL, PubMed, AusHealth, Medline and PsycInfo databases in July 2023, October 2023 and April 2024. The search included qualitative and quantitative research studies published in English between 2018 and 2024. Articles were screened for eligibility by title, abstract and full-text review by three reviewers.

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Results

A total of 1172 articles were screened, with nine articles included in the review from various countries. Key themes identified were 'continuity of care', 'partnership with woman', 'preceptor and practitioner impact' and 'context and contrast'.

Conclusions

Limited literature exists to explore and provide an understanding of the learning experiences and outcomes of midwifery students providing woman-centred care and developing a midwifery philosophy to be 'with woman'.

(Author)

2024-09340

Student midwife. Bendall E (2024), *Midwives* vol 27, July 2024, p 17

Ella Bendall is the chair of the Strategic Midwifery Leadership Group (SMiLE) student network in England. (Author, edited)

2024-09339

Pass notes. Handley-Stone R (2024), *Midwives* vol 27, July 2024, p 16

Professional advisor for education at the Royal College of Midwives (RCM) Ruby Handley-Stone shares her 10 tips for students handing over the midwifery society. (Author, edited)

2024-09327

Exploring the determinants of student midwives' wellbeing during their studies: A qualitative study. Kool L, van Hoogen M, Heerema L, et al (2024), *Women and Birth: Journal of the Australian College of Midwives* vol 37, no 4, July 2024, 101626
Problem

Student wellbeing is a global concern in the aftermath of the COVID pandemic. Students in healthcare often are exposed to academic, clinical, and psychosocial factors of stress, in particularly student midwives, as they are exposed to other people's intimate life experiences. The aim of this study was to identify factors which help and hinder student midwives in their studies.

Background

Midwifery students in the Netherlands must complete 35–50 % of their bachelor's degree with placements in community and hospital-based maternity care.

Methods

An exploratory qualitative study was conducted, using the Job-Demands-Resources model. Data were collected through semi-structured individual and group interviews with Bachelor student midwives from the Netherlands.

Findings

During coursework students found the high workload and lack of recovery time demanding. During placements, their sense of being constantly assessed, having to be available on call and being away from home were experienced as demands. The relationships with teachers as supportive. Support from their placement supervisors and peers were also resourceful if available and positive. In other cases, peer pressure and grand expectations from supervisors were demanding. Personal demands were setting ambitious standards and feeling alone during their placements, and personal resources were positive attitude towards to becoming a midwife.

Discussion

The academic programme for student midwives seemed highly demanding, with a stark difference between the learning environment in the faculty coursework and in the placements. Positive support from placement supervisors in a culture that values learning and development, can contribute to student midwives' socialization into midwifery.

(Author)

Full URL: <https://doi.org/10.1016/j.wombi.2024.101626>

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2024-08775

University nursing applications fall again to lowest in five years. Church E (2024), Nursing Times 18 July 2024, online Applications to nursing and midwifery courses at UK universities have fallen again to their lowest numbers in five years. (Author)

2024-08613

Midwives' Pathways from Health to Leaves of Absence and Return to Work. Thiessen K, Benoit C, Atanackovic J, et al (2024), Canadian Journal of Midwifery Research and Practice vol 23, no 1, 2024, pp 54-66

Background: The mental health of midwives is an area of increased investigation as these experiences affect their attrition from the profession.

Aim: To examine the mental health experiences of midwives and midwifery students in Canada and how they respond to these experiences.

Methods: A mixed methods study involved surveys with 202 midwives and midwifery students, complemented by qualitative interviews with 44 participants (33 midwives, 11 students).

Findings: Midwives and midwifery students self-report a high percentage (79%) of personal mental health issues. Of those, over half changed their work (55%), and a similar number contemplated taking a leave (59%). Far fewer midwives took a leave (17%), and 70% who did, returned to work.


Conclusion: Barriers to taking a leave of absence from work due to mental health concerns draw attention to the limited options in the models of midwifery practice currently in Canada and the need for alternatives. (Author)

2024-08597


Workplace bullying: The midwifery student experience. Capper T (2021), 14 June 2021

Aim: To explore and describe midwifery students' experiences of being the target of workplace bullying whilst on clinical placement in Australia and the United Kingdom. Background: The incidence of workplace bullying has increased dramatically in recent years and is now a major global public health concern. Workplace bullying is generally referred to as repeated unwanted behaviour towards others that is intended to cause harm, occurring within the workplace. Students undertaking placement in the clinical environment, however, only need to experience a one-off incident of inappropriate or unfair treatment for it to have a lasting adverse effect upon them. Healthcare settings provide the ideal environment for such behaviours to flourish, particularly as they are places where power differentials are commonplace. This in turn can impact staff and student wellbeing, patient safety, staff absenteeism, turnover, and productivity. Midwives are reported to commonly experience workplace bullying, leading to work dissatisfaction and subsequent attrition from the profession. Limited research, which has been predominantly quantitative and mixed methods in nature has revealed that midwifery students too are being bullied whilst on clinical placement. Gaps in the literature exist where midwifery students offer their own personal experiences of being the targets of bullying whilst on clinical placement and how this impacts them and other relevant stakeholders. Methods: This study was a qualitative descriptive design. Midwifery students based in the United Kingdom (UK) and Australia that had experienced perceived workplace bullying whilst on clinical placement were recruited via purposive sampling. Approval was obtained from the CQUniversity Australia Human Research Ethics Committee to conduct this study. Data Collection and Analysis: Data was collected using an anonymous online qualitative survey. The survey consisted of two main parts; demographic questions and open-ended questions to enable the students to explain their experiences in more detail. In total, 335 midwifery students responded to the study advertisement and confirmed that they had experienced bullying whilst on clinical placement. A total of 215 participants completed just the demographic section of the survey however, 120 participants provided participant generated textual data by fully completing or partially completing the open-ended questions. Data were thematically analysed using Braun and Clarkes (2006) six phase process. Findings: Midwifery students indicated that being the target of bullying effected them on several personal and professional levels which has the potential to have further reaching impacts upon the reputation of the profession, the quality of care provided to mothers and babies, and the quality of midwifery education. Moreover, the findings suggested that different groups of midwifery students experience bullying in

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different ways and the social context of the maternity unit significantly influences the way in which bullying behaviours are enacted and are accepted by others towards them. Midwifery students perceive a number of antecedents to being bullied exist and feel that both academic and clinical organisations could do more to provide support to them and tackle the issue of bullying in order to help ensure the future sustainability of the midwifery profession. Conclusions: This study suggests that midwifery students being bullied may have a number of impacts upon students and other key stakeholders. In order to ensure and sustain the future of the midwifery profession, more needs to be done by academic and clinical organisations to address bullying towards midwifery students and prevent the continuation of the bullying cycle. (Author)

2024-08439

Educational training programs on intimate partner violence in pregnancy for midwives/student midwives: A scoping review. Manoli E, Kouta C, Karanikola M, et al (2024), *European Journal of Midwifery* vol 8, July 2024, p 38

Introduction:

Educational strategies for preventive screening and effective interventions in midwives are needed to improve clinical practice and outcomes for abused women and their families. This scoping review aimed to describe available educational training programs on intimate partner violence (IPV) in pregnancy for midwives/student midwives.

Methods:

A scoping review of the literature, which was published in English from January 2010 to March 2023, in PUBMED, EBSCO, and CINAHAL databases, was applied. The following keywords were used in the search: 'evaluation', 'educational training', 'course', 'midwives', 'student midwife', 'intimate partner violence', 'pregnancy', combined with AND and OR Boolean operators. The included studies focused on training programs/courses for midwives/student midwives regarding intimate partner violence.

Results:

A total of 9 studies were eligible for inclusion, describing six programs for midwives and 3 for student midwives. Educational interventions varied in length (e.g. a few hours to weeks) and educational approaches such as multidisciplinary sessions, lectures, theory, role-playing, practice in screening, group activities, watching videos, and case reports discussion. The programs had similar content, including raising awareness of violence, defining it, discussing gender roles, the impact of IPV on women's health, referral agencies, and the laws regarding violence in each country.

Conclusions:

This scoping review highlighted a lack of educational programs on intimate partner violence during pregnancy, suggesting that new programs need to be developed based on contemporary clinical practices and recommendations for midwifery education. (Author)

Full URL: <https://doi.org/10.18332/ejm/189282>

2024-08362

Exposure to disrespectful maternity care and perceptions of respectful maternity care among nursing and midwifery pre-registration students in China: A national cross-sectional study. Huang J, Fu L, Fu Y, et al (2024), *Nurse Education in Practice* vol 78, July 2024, 104026


Aims

To 1) determine the prevalence and types of disrespectful maternity care witnessed by students; 2) describe students' perceptions of respectful maternity care and associated factors; and 3) investigate whether witnessing disrespectful care influences their perceptions of respectful maternity care.


Background

Limited evidence exists about nursing and midwifery students' perceptions of respectful maternity care and

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prevalence of disrespectful maternity care in China. Understanding students' perceptions can inform pre-registration curricula and clinical practice programs, promoting the implementation of respectful maternity care.

Design

An exploratory national online survey was conducted.

Methods

Data were analysed using bivariate analysis and multi-factor analysis of variance.

Results

Among 733 students, positive perceptions towards respectful maternity care were common. Approximately one-fifth witnessed disrespect, with physical violence, lack of communication and untimely care most frequently reported. A better understanding of respectful maternity care was associated with female students of Han ethnicity, majoring in midwifery, undertaking a longer internship/practicum and reporting fewer instances of observed disrespect.

Although students reported positive perceptions of respectful maternity care, inadequate understanding was evident. Incorporating relevant content about respectful care into the curriculum is suggested. Reducing students' exposure to disrespectful maternity care may ensure that certain forms of disrespect or abuse do not become normalized among students. This requires system-level efforts to create a safe and supportive working environment for maternity health providers.

Conclusion

To promote respectful maternity care in China, system-level changes are warranted. Respectful maternity care needs to be essential content in pre-registration midwifery and nursing curricula. Encouraging students to identify poor practice and discuss good practice in a safe learning environment is warranted. (Author)

2024-08336

Breast self-examination among community midwife and lady health visitor students in Pakistan. Bibi A, Khan A (2024), Journal of Midwifery & Women's Health vol 32, no 7, July 2024, pp 364–368

Background/Aims

Breast self-examination allows women to check their breasts for changes or abnormalities, such as lumps, bumps and other irregularities. The purpose of this study was to evaluate understanding of performing a breast self-examination among lady health visitor and community midwifery students in Pakistan.

Methods

This descriptive cross-sectional study was conducted from December 2022–April 2023 with 50 students recruited through convenient sampling. Data were collected using a structured questionnaire. Participants' understanding of breast self-examination was categorised as good (>70%), moderate (50–70%) or poor (<50%) based on their score.

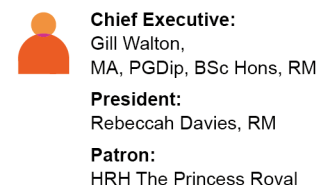
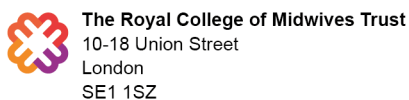
Results

Only one participant had received any training on breast self-examination, and all participants reported that they would like training in future. Only 10.0% of participants had a moderate understanding of breast self-examination, while the remaining 90.0% had poor understanding.

Conclusions

There is a significant lack of knowledge about breast self-examination among lady health visitors and midwifery students in Pakistan. There is a need for education and awareness campaigns on breast self-examination to improve understanding. (Author)

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2024-08334

The diversity debate: is midwifery higher education addressing the challenges of systemic racism?. Chenery-Morris S, Divers J (2024), Journal of Midwifery & Women's Health vol 32, no 7, July 2024, pp 380–386

This series of six articles is inspired by themes arising from the Royal College of Midwives State of Midwifery Education report. The series explores the current landscape and challenges in educating the future midwifery workforce, particularly those that pertain to the higher education workforce. This third article highlights the lack of global majority midwifery academics, and charts the decisions and experiences of global majority applicants and students in midwifery higher education. The barriers these students face include systemic and individual racism. These experiences likely impact global majority midwives choosing academic careers, yet greater diversity and representation is needed in the education workforce. This article explores how this might be achieved by examining sources of systemic racism and how to decolonise midwifery curricula in order to tackle inequality not just for educators and professionals, but for women in midwifery care. (Author)

2024-08119

Response to the Scotland Student Midwives Finance Report [written answer]. Scottish Parliament (2024), Official Report Written question S6W-28261, 20 June 2024

Neil Gray responds to a written question from Monica Lennon to the Scottish Government, asking the Scottish Government what its response is to the Scotland Student Midwives Finance Report, published by the Royal College of Midwives. (EA)

Full URL: <https://www.parliament.scot/chamber-and-committees/questions-and-answers/question?ref=S6W-28261>

2024-08115

A narrative review of Master's programs in midwifery across selected OECD countries: Organizational aspects, competence goals and learning outcomes. Kranz A, Schulz AA, Weinert K, et al (2024), European Journal of Midwifery vol 8, June 2024, p 30

Shifting midwifery education to a university level is of great importance for healthcare systems worldwide by preparing graduates for current and future challenges. Some of them referring to management, research and teaching tasks as well as advanced practitioner roles, require competences that can only be acquired in a Master's program. The objectives of this narrative review are to outline the differences and commonalities of organizational aspects of Master's programs in selected OECD countries and to point out the competence goals and learning outcomes they are based on. Fifteen Master's programs in twelve OECD countries were identified and analyzed. Considering the organizational characteristics, differences are found in admission requirements and qualification levels, while similarities relate to the awarded title (MSc). All programs aim to develop abilities for research to advance midwifery practice. Leadership and management abilities are addressed through effective teamwork and communication. The programs' aims are to develop abilities for midwifery education tasks. Whereas competence goals mostly align across the programs, they are addressed differently through various learning outcomes. Development and enhancement of Master's programs in midwifery are needed by focusing on core elements, such as common competence goals. It is equally important to adapt them to national healthcare and educational systems. (Author)

Full URL: <https://doi.org/10.18332/ejm/188195>

2024-08112


A qualitative evaluation of a student midwife placement teaching English to speakers of other languages (ESOL).

Maxwell C, Robinson A, Donaghy-Binks P, et al (2024), European Journal of Midwifery vol 8, June 2024, p 31


Introduction:

A shortage of UK midwives has put pressure on clinical placements and supervision of student midwives. Alternative placement solutions are needed to provide students with meaningful learning experiences. One such learning experience was a placement undertaken by student midwives who attended a program teaching English to speakers of other languages (ESOL). This study evaluated the impact of the placement on student midwife learning and experiences of the ESOL participants.

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Methods:

The 2022 study employed a qualitative design using Kolb's model of experiential learning as a framework. Ten student midwives placed with the ESOL program and three women enrolled in the program participated. Data were collected via online focus groups with the student midwives and a face-to-face focus group with the women. Data were analyzed using thematic analysis and Kolb's model of experiential learning.

Results:

Four themes were constructed: 'Putting the scripts aside: expectations versus the reality of being an educator', 'Adapting and personalizing teaching', 'We are learning too: an environment for mutual learning', and 'Taking our learning forwards'. Students faced barriers during their placement and had to adapt their teaching accordingly. They gained crucial knowledge of the challenges faced by women who speak other languages. The women valued the students' input and together they forged a reciprocal learning environment.

Conclusions:

This study demonstrates how placing student midwives in a unique non-maternity setting has benefits for student learning which are transferrable to future practice. Importantly, it confirms that quality of learning during a novel placement is not compromised for students or participants. (Author)

Full URL: <https://doi.org/10.18332/ejm/188531>

2024-07942

Identifying Drivers and Barriers to Precepting Midwifery Students: "A Little Part of Me Lives on in Each Student Midwife". Blumenfeld J, Alspaugh A, Wright L, et al (2024), *Journal of Midwifery & Women's Health* 7 June 2024, online

Introduction

Increased access to midwifery care is one strategy that could improve perinatal health outcomes and help address the maternal health crisis in the United States. A modifiable barrier to increasing the workforce is greater access to midwifery preceptors for clinical training. The objective of this research is to use the socioecological framework to identify midwives' perceptions of the barriers and facilitators to precepting students in clinical areas.

Methods

Midwives attending a preceptor education and training workshop series responded to 3 different questions at the end of each session: (1) What makes precepting midwifery students challenging? (2) What makes precepting midwifery students possible? and (3) What makes precepting midwifery students worthwhile? Responses were coded to align with the socioecological framework, which distinguishes individual, interpersonal, community, institutional, and policy-level influences.

Results

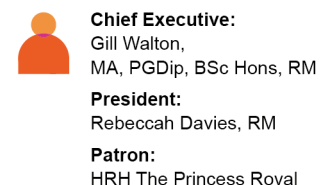
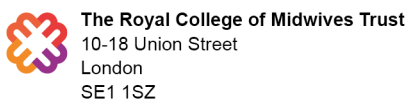
Midwives' responses were spread across the levels of the socioecological model except for policy. Participants identified institutional influences such as support as factors that made precepting feasible, both individual and interpersonal factors such as time constraints as areas that presented challenges to precepting, and community factors, like the joy of sharing midwifery, contributing to what made precepting worthwhile.

Discussion

Multiple levels of influence were identified in the preceptor process. Participants were internally motivated to precept while also articulating that to make precepting possible, there is a need for support from both colleagues and the greater systems within which they worked. Further studies are needed to investigate an ecosystem that facilitates an effective and sustainable model for midwifery precepting. Additionally, there is a need for efforts to engage and educate midwives in clinical practice about government advocacy that could actualize policy initiatives to support clinical midwifery education. (Author)

Full URL: <https://doi.org/10.1111/jmwh.13654>

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2024-07708

Augmented reality simulation-based training for midwifery students and its impact on perceived knowledge, confidence and skills for managing critical incidents. Vogel K, Bernloehr A, Willmeroth T, et al (2024), *Midwifery* vol 136, September 2024, 104064

Problem

Emergency obstetric management is essential in midwifery training to prevent fetal and maternal morbidity. Repeating this management in practice is often not possible. Sustainable confidence in these procedures is usually achieved in the first few years of practice.

Background

Simulation training complements hands-on learning and improves practical skills, benefiting both students and patients. Research on obstetric emergency simulation training have demonstrated this, but the use of digital simulation approaches, such as augmented reality (AR), is under-researched.

Aim

To investigate whether AR simulation training influences midwifery students' subjective perceptions of knowledge, confidence and practical skills in emergency situations.

Methods

A descriptive exploratory study was conducted using a pre-post design. AR scenarios were developed on the topics of 'preparing emergency tocolysis', 'preparing a pregnant woman for caesarean section' and 'resuscitation of newborns'. The AR simulation was conducted in the fourth to fifth semester of the midwifery programme. A questionnaire was developed for students (N = 133) to self-assess their competence in the categories of knowledge, confidence and practical skills.

Results

Students rated their competence significantly better in the post-survey than in the pre-survey ($p < 0.05$). Simulation has an impact on self-assessment of professional knowledge, confidence and practical skills in emergency situations. It enhances students' procedural knowledge and practical skills in complex contexts, complements subject knowledge and builds confidence.

Conclusion

The results provide initial evidence that AR simulation is an effective learning strategy for emergency management preparedness. Future studies should validate the effect with control cohorts and measure competence through practical examinations. (Author)

Full URL: <https://doi.org/10.1016/j.midw.2024.104064>

2024-07687

Cultivating student researchers: Reflections on a summer undergraduate student fellowship scheme. Lloyd B, Timothy K, Bradshaw C, et al (2024), *Midwifery* vol 133, June 2024, 103989

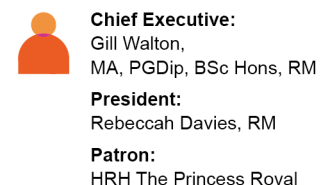
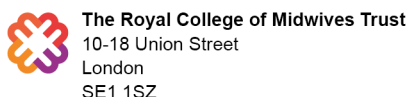
A commentary on the personal experience of a midwifery student who participated in an eight-week summer undergraduate student fellowship scheme. The student describes how this project help them to enhance their research skills. (AS)

2024-07418

Psychological interventions to foster resilience in healthcare students (Cochrane Review). Kunzler AM, Helmreich I, König J, et al (2020), *Cochrane Database of Systematic Reviews* issue 7, 20 July 2020, Art No.: CD013684

Background

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Resilience can be defined as maintaining or regaining mental health during or after significant adversities such as a potentially traumatising event, challenging life circumstances, a critical life transition or physical illness. Healthcare students, such as medical, nursing, psychology and social work students, are exposed to various study- and work-related stressors, the latter particularly during later phases of health professional education. They are at increased risk of developing symptoms of burnout or mental disorders. This population may benefit from resilience-promoting training programmes.

Objectives

To assess the effects of interventions to foster resilience in healthcare students, that is, students in training for health professions delivering direct medical care (e.g. medical, nursing, midwifery or paramedic students), and those in training for allied health professions, as distinct from medical care (e.g. psychology, physical therapy or social work students).

Search methods

We searched CENTRAL, MEDLINE, Embase, 11 other databases and three trial registries from 1990 to June 2019. We checked reference lists and contacted researchers in the field. We updated this search in four key databases in June 2020, but we have not yet incorporated these results.

Selection criteria

Randomised controlled trials (RCTs) comparing any form of psychological intervention to foster resilience, hardiness or post-traumatic growth versus no intervention, waiting list, usual care, and active or attention control, in adults (18 years and older), who are healthcare students. Primary outcomes were resilience, anxiety, depression, stress or stress perception, and well-being or quality of life. Secondary outcomes were resilience factors.

Data collection and analysis

Two review authors independently selected studies, extracted data, assessed risks of bias, and rated the certainty of the evidence using the GRADE approach (at post-test only).

Main results

We included 30 RCTs, of which 24 were set in high-income countries and six in (upper- to lower-) middle-income countries. Twenty-two studies focused solely on healthcare students (1315 participants; number randomised not specified for two studies), including both students in health professions delivering direct medical care and those in allied health professions, such as psychology and physical therapy. Half of the studies were conducted in a university or school setting, including nursing/midwifery students or medical students. Eight studies investigated mixed samples (1365 participants), with healthcare students and participants outside of a health professional study field.


Participants mainly included women (63.3% to 67.3% in mixed samples) from young adulthood (mean age range, if reported: 19.5 to 26.83 years; 19.35 to 38.14 years in mixed samples). Seventeen of the studies investigated group interventions of high training intensity (11 studies; > 12 hours/sessions), that were delivered face-to-face (17 studies). Of the included studies, eight compared a resilience training based on mindfulness versus unspecific comparators (e.g. wait-list).

The studies were funded by different sources (e.g. universities, foundations), or a combination of various sources (four studies). Seven studies did not specify a potential funder, and three studies received no funding support.


Risk of bias was high or unclear, with main flaws in performance, detection, attrition and reporting bias domains.

At post-intervention, very-low certainty evidence indicated that, compared to controls, healthcare students receiving resilience training may report higher levels of resilience (standardised mean difference (SMD) 0.43, 95% confidence interval (CI) 0.07 to 0.78; 9 studies, 561 participants), lower levels of anxiety (SMD -0.45, 95% CI -0.84 to -0.06; 7

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studies, 362 participants), and lower levels of stress or stress perception (SMD -0.28, 95% CI -0.48 to -0.09; 7 studies, 420 participants). Effect sizes varied between small and moderate. There was little or no evidence of any effect of resilience training on depression (SMD -0.20, 95% CI -0.52 to 0.11; 6 studies, 332 participants; very-low certainty evidence) or well-being or quality of life (SMD 0.15, 95% CI -0.14 to 0.43; 4 studies, 251 participants; very-low certainty evidence).

Adverse effects were measured in four studies, but data were only reported for three of them. None of the three studies reported any adverse events occurring during the study (very-low certainty of evidence).

Authors' conclusions

For healthcare students, there is very-low certainty evidence for the effect of resilience training on resilience, anxiety, and stress or stress perception at post-intervention.

The heterogeneous interventions, the paucity of short-, medium- or long-term data, and the geographical distribution restricted to high-income countries limit the generalisability of results. Conclusions should therefore be drawn cautiously. Since the findings suggest positive effects of resilience training for healthcare students with very-low certainty evidence, high-quality replications and improved study designs (e.g. a consensus on the definition of resilience, the assessment of individual stressor exposure, more attention controls, and longer follow-up periods) are clearly needed. (Author)

Full URL: <https://doi.org/10.1002/14651858.CD013684>

2024-07375

Simulation-Enhanced Skills in Perinatal Bereavement Care. Leyland A (2024), *The Practising Midwife* vol 27, no 3, May 2024, pp 32-34

The unexpected death of a baby through stillbirth is a tragic and traumatic event for parents and caregivers. For midwifery students, the emotional toll of caring for bereaved parents is significant. Many students feel unprepared, lost and helpless encountering grieving parents for the first time. These negative emotions pose a major barrier to parents receiving high-quality compassionate care. Key skills are needed to support effective care. (Author)

2024-07371

Teaching Perinatal Loss Through Lived Experience. Einion A (2024), *The Practising Midwife* vol 27, no 3, May 2024, pp 29-31

Supporting students and qualified staff to provide care during perinatal bereavement is a challenge. In UK culture, death remains a taboo, while the death of a child is considered even more difficult to come to terms with. Conversely, pregnancy loss is often minimised. Bringing the expertise of experience to bear as part of educational approaches to supporting learners ensures that perinatal loss is viewed as a human life event, not simply a theoretical or clinical practice issue. (Author)

2024-07304

The wellbeing shelf: A mixed methods study exploring the impact of a resilience web resource for first year nursing and midwifery students. Hughes C, O'Neill D, Mitchell G, et al (2024), *Nurse Education Today* 4 June 2024, online

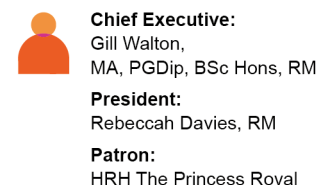
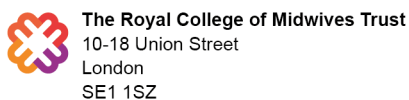
Background

Nurturing a resilient nursing and midwifery workforce is vital for the National Health Service's sustainability. Higher Education Institutions (HEIs) must support students, given the challenges and attrition rates. Nursing and midwifery education uniquely balances tuition and placements, posing challenges, especially for first-year students, who face stressors including lack of familiarity, knowledge gaps, and emotional exposure.

Objectives

This study aimed to introduce and evaluate a co-designed web-based intervention called 'The Wellbeing Shelf' to

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enhance resilience among first-year nursing and midwifery students.

Design

An exploratory mixed methods approach was employed, combining quantitative pre- and post-intervention questionnaires and qualitative focus groups.

Settings and participants

The study involved 353 first-year nursing and midwifery students at Queen's University Belfast.

Methods

'The Wellbeing Shelf' was developed through co-design workshops. Quantitative measures included the Connor Davidson Resilience Scale (CD-RISC) and the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS). Qualitative data were collected through focus group interviews.

Results

Quantitative data showed a decrease in both resilience and wellbeing scores over time. The CD-RISC scores decreased significantly from Time 1 to Time 3. Qualitative findings revealed three themes: "Acquiring" knowledge about wellbeing, "Actioning" self-care strategies, and "Advocating" for self-care among peers and family.

Conclusions

The study introduced 'The Wellbeing Shelf' as a resource to enhance resilience among nursing and midwifery students. Whilst the resource offered a variety of activities and fostered a sense of belonging, challenges in resource accessibility and student confidence were identified. The study also highlighted the importance of students advocating for self-care practices. Despite the resource's introduction, resilience and wellbeing scores decreased over time, suggesting a need for further research and potentially a control group. Understanding the initial lower resilience of nursing and midwifery students is crucial for future interventions in this high-demand program. (Author)

Full URL: <https://doi.org/10.1016/j.nedt.2024.106265>

2024-07303

Learning disability awareness training for undergraduate midwifery students: Multi-method evaluation of a co-produced and co-delivered educational intervention in England. Cox A, Tobutt D, Harris J, et al (2024), Nurse Education

Today 14 June 2024, online

Background

Midwives lack the confidence and competence to identify and support people with learning disabilities, putting this population at risk of inequitable maternity care.

Objectives

To co-produce, co-deliver and evaluate maternity focused learning disability awareness training for student midwives, in collaboration with experts-by-experience (people with learning disabilities).

Design

Multi-methods study evaluating the impact and acceptability of learning disability awareness training.

Settings

University in south-east England, UK.

Participants

83 midwifery students and 7 experts-by-experience.

Methods

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Midwifery students completed pre-post training surveys and a follow-up survey 3 months post training to substantiate longer-term impact. Experts-by-experience took part in qualitative interviews post training.

Results

Student-reported learning disability awareness was significantly higher across all domains post training and sustained at follow up. Students reported the most notable aspect of training was learning with and from people with learning disabilities. Three inter-related themes were constructed from interviews with experts-by-experience: reasonable adjustments to training and research processes; a positive social, emotional and learning experience; and perceptions of impact.

Conclusions

Findings from this study suggest that co-producing and co-delivering resources and education to an undergraduate midwifery workforce with people with lived experience, can have a profound impact on students and is also a positive experience for people with learning disabilities. The co-produced resources used in this training are free and accessible [<https://www.surrey.ac.uk/togetherproject>]. Further evaluation will explore acceptability and perceived impact of training and resources on other healthcare professionals working with maternity services. (Author)

2024-07302

A cinenurducation activity using Call the Midwife to teach about sexually transmitted infections and preeclampsia: design, implementation, and assessment. Cambra-Badii I, Baños JE, Garrido AB, et al (2024), Nurse Education Today vol 138, July 2024, 106198

Background

Nursing students need to learn about sexually transmitted infections and preeclampsia. Cinenurducation is a rigorous method that uses materials from commercial movies or television series to teach health sciences students.

Objectives

Using content analysis of the television series Call the Midwife, design a cinenurducation activity teaching nursing students about sexually transmitted infections and preeclampsia. Evaluate its effectiveness in knowledge acquisition.

Design, implementation, and pre-post assessment of knowledge gain for teaching activities

The study comprised three main steps: designing the teaching activity, implementing it, and analyzing its pedagogical effectiveness through a pre-and-post study to assess knowledge acquisition resulting from the teaching activity.

Participants

A six-member panel assessed the suitability of materials for the teaching goals. All second-year undergraduate nursing students in the course “Nursing management and leadership” at a nursing school in the 2022–2023 academic year were invited to participate (N = 160).

Methods

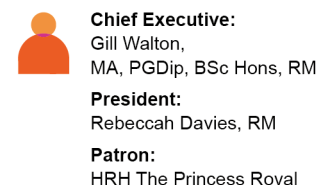
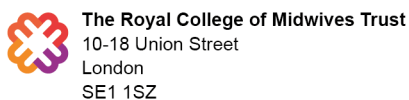
The panel conducted a content analysis of the first two seasons of the series to determine the usefulness of each episode for teaching the chosen topics. Students were randomly assigned to groups watching episodes emphasizing either sexually transmitted infections or preeclampsia, followed by discussion. Learning was gauged through a pre-post viewing 20-question multiple-choice test. Additionally, students' satisfaction was evaluated.

Results

A total of 142 nursing students participated. Significant differences between mean scores before and after intervention were found [6.90 vs. 6.42 on the preintervention assessment, $p < 0.05$; mean gain, 0.49 (95 % CI: 0.22–0.76)]. Most students were satisfied with the activity.

Conclusions

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The activity was useful for teaching about sexually transmitted infections and preeclampsia. The use of a television series portraying nurses enables the exploration of these critical topics. This has potential implications for integrating similar methods into nurse education curricula, emphasizing the broader impact of the research on pedagogical practices in healthcare education. (Author)

Full URL: <https://doi.org/10.1016/j.nedt.2024.106186>

2024-07301

TransfOrming Transnational intErcultural sensitivity for Midwifery students through an inclusive mobility model: A mixed-method evaluation of the TOTEMM project. Borrelli S, Konstantinidis S, Fumagalli S, et al (2024), Nurse Education

Today vol 138, July 2024, 106186

Background

Contemporary midwifery curricula require that student midwives have insight and understanding of global health practice and intercultural sensitivity. The current mobility model excludes large numbers of students from engaging in transnational learning.

Objectives

1) to evaluate midwifery students' experiences of blended mobility; 2) to investigate if the combination of virtual and physical mobility activities supported development of intercultural sensitivity and soft skills.

Design

Multi-centre mixed-methods study.

Settings

Four European Higher Education Institutions located in England, Italy, Estonia and The Netherlands.

Participants

Sixty-four midwifery students studying in one of the four partner institutions selected as study sites and who participated in the TOTEMM blended mobility scheme took part in the evaluation.

Methods

Data were collected through two online surveys, face-to-face focus groups and learning analytics. Descriptive summary statistical analysis of survey data was undertaken. Focus group discussions were subjected to thematic analysis. Findings from the quantitative survey and qualitative focus groups were merged using a convergent mixed methods approach. Learning Analytics were interpreted as complementary to the above components, to further triangulate the findings.

Results


Both virtual and physical components were evaluated positively by students, with high engagement confirmed by learning analytics. A statistically significant increase in the mean of the Total Intercultural Sensitivity Scale score was seen between the pre- and post-mobility surveys, indicating participation in the TOTEMM mobility model was associated with enhanced intercultural sensitivity. Positive effects on confidence, open-mindedness, empathy, interaction and non-judgment were shared by participants.

Conclusions


TOTEMM is an innovative inclusive approach to enable a diverse student group to benefit from transnational learning, including the development of intercultural sensitivity. The TOTEMM blended mobility model has potential for integration into future midwifery curricula and programmes in the four partner settings involved in TOTEMM and utility for the wider European context. (Author)

Full URL: <https://doi.org/10.1016/j.nedt.2024.106186>

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2024-06921

Effects of midwifery and nursing students' readiness about medical Artificial intelligence on Artificial intelligence anxiety. Demir-Kaymak Z, Turan Z, Unlu-Bidik N, et al (2024), Nurse Education in Practice vol 78, July 2024, 103994

Background

Artificial intelligence technologies are one of the most important technologies of today. Developments in artificial intelligence technologies have widespread and increased the use of artificial intelligence in many areas. The field of health is also one of the areas where artificial intelligence technologies are widely used. For this reason, it is considered important that healthcare professionals be prepared for artificial intelligence and do not experience problems while training them. In this study, midwife and nurse candidates, as future healthcare professionals, were discussed.

Aim

This study aims to examine the effect of the artificial intelligence readiness on the artificial intelligence anxiety and the effect of artificial intelligence characteristic variables (artificial intelligence knowledge, daily life, occupational threat, artificial intelligence trust) on the medical artificial intelligence readiness and artificial intelligence anxiety of students.

Methods

This study was planned and carried out as a relational survey study, which is a quantitative research. A total of 480 students, consisting of 240 nursing and 240 midwifery students, were included in this study. SPSS 26.0 and AMOS 26 package programs were used to analyse the data and descriptive statistics (frequency, percentage, mean, standard deviation) and path analysis for the structural equation model were used.

Results

No significant difference was found between the medical artificial intelligence readiness ($p=0.082$) and artificial intelligence anxiety ($p=0.486$) scores of midwifery and nursing students. The model of the relationship between medical artificial intelligence readiness and artificial intelligence anxiety had a good goodness of fit. Artificial intelligence knowledge and using artificial intelligence in daily life are predictors of medical artificial intelligence readiness. Using artificial intelligence in daily life, occupational threat and artificial intelligence trust are predictors of artificial intelligence anxiety.

Conclusion

Midwifery and nursing students' AI anxiety and AI readiness levels were found to be at a moderate level and students' AI readiness affected AI anxiety. (Author)

2024-06789

The knowledge of and educational interest in sexual medicine among Finnish medical and midwifery students: A web-based study. Manninen SM, Polo-Kantola P, Riskumäki M, et al (2024), European Journal of Midwifery vol 8, May 2024, p 20


Introduction:

Many elements of life can affect sexual health; thus, healthcare professionals require good knowledge of sexual medicine to encounter patients with these issues. We aimed to study final-year medical and midwifery students' self-reported knowledge of factors associated with sexuality and their knowledge of how to evaluate and treat/counsel patients with sexual problems. In addition, educational interests regarding sexual medicine were assessed.


Methods:

In a cross-sectional study, a web-based questionnaire was distributed to final-year medical ($n=233$) and midwifery ($n=131$) students graduating between December 2018 and May 2019 in Finland.

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Results:

Both student groups self-reported insufficient knowledge of how to consider sexuality in mentally ill patients, how to encounter victims of domestic violence/sexual abuse, and how multiculturalism affects sexuality. In addition, compared to the midwifery students, the medical students were more likely to self-report insufficient knowledge of the basics of sexual pleasure and treating the lack of it ($p < 0.001$), including how to treat sexual problems due to relationship problems ($p < 0.001$) or chronic diseases ($p = 0.015$). Although several educational areas of interest arose, both student groups had two mutual most desirable educational interests: 1) reasons for dyspareunia and its treatment, $n = 117/233$ (50.2%) for medical students, and $n = 60/131$ (45.8%) for midwifery students; and 2) lack of sexual desire and its treatment, $n = 100/233$ (42.9%) for medical students, and $n = 55/131$ (42.0%) for midwifery students.

Conclusions:

In both student groups, the self-reported knowledge of sexual medicine was insufficient. Thus, more education on sexual medicine should be included in the curricula of medical and midwifery education. (Author)

Full URL: <https://doi.org/10.18332/ejm/186401>

2024-06786

Slovenian midwifery students and their self-estimation of mindfulness: A cross-sectional study with modified MAAS.

Turin L, Mivšek PA (2024), European Journal of Midwifery vol 8, April 2024, p 16

Introduction:

We investigate the level of mindfulness among midwifery students, as mindfulness can have a major impact on their perception of stress and can increase the quality of their work after graduation.

Methods:

A causal, non-experimental method of a cross-sectional study was used. We collected data using an online questionnaire that included a valid modified Mindful Attention Awareness Scale - MAAS. The sample consisted of Slovenian midwifery students in academic year 2022–2023.

Results:

Fifty-five Slovenian midwifery students (82% response rate) participated in the study. The average score of all midwifery students on the 5-Likert modified MAAS was 3.2, with the lowest average score among second-year students. Those students who practiced mindfulness techniques in their free time had higher average scores than those who did not.

Conclusions:

The average MAAS score of our midwifery students was lower than in other foreign studies among nursing students. The study program should promote student mindfulness. This would benefit the graduates also later, when employed, as investing in midwives' well-being improves both their job satisfaction and women's experience of care. The Slovenian curriculum is often perceived as overwhelming by students. This might be the reason for their low mindfulness scores. Further analysis of the curriculum is needed to find solutions on how to integrate mindfulness techniques into the undergraduate curriculum. (Author)

Full URL: <https://doi.org/10.18332/ejm/185649>

2024-06769

Attitudes towards sexual education among midwifery students. Bahadır-Yılmaz E (2023), European Journal of Midwifery vol 7, November 2023, p 31

Midwifery students have an essential role in improving the sexual health of individuals, families, and communities. Studies conducted with midwifery students show that students are inadequate in sexual education and counseling. However, sexual health counseling given by midwives increased women's sexual satisfaction during pregnancy and postpartum, decreased their inefficient sexual beliefs, and increased the sexual function of postmenopausal women.

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Midwifery students need to have positive attitudes towards sexuality to be able to provide sexual health counseling in their professional life as midwives. Therefore, this cross-sectional study aimed to determine midwifery students' attitudes toward sexual education. (Author, edited)

Full URL: <https://doi.org/10.18332/ejm/172511>

2024-05890

Scotland student midwives finance report. The Royal College of Midwives Scotland Board (2024), 30 May 2024. 12 pages
Over a third of midwifery students in Scotland are so worried about the financial burden of their education that they struggle to sleep at night. That was the stark message Members of the Scottish Parliament (MSPs) heard from student members of the Royal College of Midwives (RCM).

The RCM Scotland Student Midwives Finance Report highlights that 70% of midwifery students had to take on additional debt to cover the cost of their studies. It also notes that three out of five midwives worry they will have to drop out of their course for financial reasons. While most students receive a bursary, it's not nearly enough to cover their costs.

RCM Director for Scotland, Jaki Lambert, outlined the measures the RCM wants to see the Scottish Government implement to fix the crisis:

"At a time when we need to invest in the midwifery workforce in Scotland, the system needs to do more to support our future midwives. The cost of training to be a midwife in many cases is too much to bear. With over half of midwifery students considering dropping out because they can't afford to complete their course, the bursary, which has been frozen for years, needs to be raised urgently to reflect the cost of living in 2024. Make no mistake, we need these students. In one week alone, midwives in worked cumulatively over 12000 hours extra hours just to keep services running. They desperately need support of the next generation and for them to then stay in the profession."

Ella Bendall, student member of the RCM and, Chair of the RCM student network in Scotland who helped compile the report, told MSPs about the financial worries she faced when training to be a midwife:

"In my time as a student midwife, I often work over sixty hours per week across university, placement, and part-time work in order to make ends meet and make sure my mortgage is paid. My experience is extremely common amongst student midwives in Scotland, and does not take into account those that also have additional caring responsibilities or have been unfairly penalised by having benefits cut just to undertake their studies. This report illuminates the fragile financial situation that Scottish student midwives face, and potentially will make a tangible difference for students in the future."

Other key findings of the survey are:

Almost 70% of midwifery students report losing their benefits once they began their training. These costs aren't offset by the bursary they receive instead.

One in five students reported they were not able to claim back the full cost of getting to and from their placement, despite some travelling up to 60 miles a day to get there. (Author)

Full URL: <https://www.rcm.org.uk/media/7453/jgc2361-scotland-student-midwives-finances-report-digital.pdf>

2024-05878

"You and Me Do It for the Love of Teaching": Exploring the Expansion of Clinical Training Opportunities for Midwives.

Alsbaugh A, Blumenfeld J, Wright LV, et al (2024), The Journal of Perinatal and Neonatal Nursing vol 38, no 2, April/June 2024, pp 147-157

Purpose:

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To better understand the barriers and facilitators to precepting midwifery students from across the healthcare ecosystem in New Jersey.

Background:

Growing the midwifery workforce is a crucial step to alleviating disparately poor perinatal health outcomes and expanding access to care. Difficulty recruiting and retaining preceptors has been identified as a barrier to graduating more midwives.

Methods:

In-depth qualitative interviews were conducted with 19 individuals involved in different stages of the clinical training process: midwives, physicians, and administrators. Transcripts were coded using the tenets of qualitative description and thematic analysis. Analysis was guided by the Promoting Action on Research Implementation in Health Services framework.

Results:

The following themes were identified and organized within the domains identified by our conceptual framework. Evidence: (mis)understanding the benefits of midwifery care and impacts on patient care. Context: the time and energy it takes to precept and practice considerations. Facilitations: developing the next generation of healthcare providers and the quiet and ever-present role of money in healthcare.

Conclusions:

Findings from this study support the importance of approaching midwifery precepting as a multifaceted endeavor, one that necessitates the full support of individuals within many different roles in an organization.

Implications for practice and research:

Getting buy-in from various levels of the healthcare ecosystem requires a flexible approach but must include a targeted effort toward showing the value of midwifery care in terms of patient outcomes, satisfaction, and cost.

(Author)

2024-05796

Nursing/midwifery students' perceptions of caring pedagogy and online learning during the COVID-19 pandemic.

Jones R, Jackson D, Rice K, et al (2024), Journal of Advanced Nursing 9 May 2024, online

Aim

This study aimed to gain a better understanding of nursing/midwifery students' perspectives on a pedagogy of caring and online learning during the COVID-19 pandemic. In addition, it aimed to determine if the COVID-19 pandemic impacted students' perceptions and experience of online learning and students' desire to enter the nursing/midwifery workforce.

Design

Mixed methods.

Methods

A multi-centre cross-sectional survey of Australian nursing and midwifery students was undertaken to explore students' experience of learning during the COVID-19 pandemic.

Results

There are several key findings from this study that may be relevant for the future delivery of undergraduate health education, students transitioning to practice and healthcare workforce retention. The study found that although students were somewhat satisfied with online learning during COVID-19, students reported significant issues with knowledge/skill acquisition and barriers to the learning process. The students reported feeling less prepared for

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practice and identified how clinical staff were unable to provide additional guidance and support due to increased workloads and stress. The textual responses of participants highlighted that connection/disconnection, empathy and engagement/disengagement had an impact on learning during COVID-19.

Conclusion

Connection, engagement and isolation were key factors that impacted nursing students' online learning experiences. In addition, graduates entering the workforce felt less prepared for entry into practice due to changes in education delivery during COVID-19 that they perceived impacted their level of clinical skills, confidence and ability to practice as new graduate nurses/midwives.

Patient or Public Contribution

Not applicable.

Impact

Attention must be given to the transition of new graduate nurses and midwives whose education was impacted by pandemic restrictions, to support their professional career development and to ensure retention of future healthcare workforce.

Connection, engagement and isolation were key factors that impacted nursing students' online learning experiences. Educators should consider how connection and engagement can be actively embedded in the online learning environment. (Author)

Full URL: <https://doi.org/10.1111/jan.16224>

2024-05686

Development of a Midwifery Student Peer Debriefing Tool: An interpretive descriptive study. Buchanan K, Ross C, Bloxsome D, et al (2024), Nurse Education Today vol 137, June 2024, 106167

Background

Psychosocial traumatisation associated with giving birth, can occur in those present with the woman giving birth, a phenomenon known as vicarious trauma. It has been identified that there are currently no interventions available for midwifery students who have experienced vicarious trauma following difficult birth experiences.

Objective

To explore whether the counselling intervention developed by Gamble et al. (2005), can be adapted for midwifery students to be appropriately and feasibly used as a counselling intervention with peers who have experienced midwifery practice-related vicarious trauma.

Design

Interpretive descriptive methodology.

Setting

This study was set at two Australian universities from which pre-registration midwifery courses are delivered.

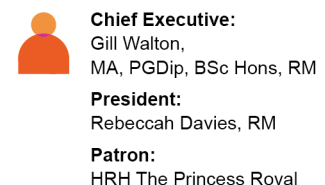
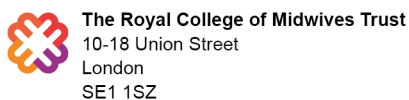
Participants

The work of reviewing the original tool and adapting it for use by and with midwifery students associated with this project was conducted by a key stakeholder group of seven representative midwifery students and five midwifery academics.

Methods

Ethics were approved. Data were collected via one face to face and two online conversations using the Microsoft Teams™ platform. Reflexive Thematic analysis were applied to revise the tool following each round of data collection and to finalise the adaptation of the intervention for its new intended purpose.

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Results

The Midwifery Student Peer Debriefing Tool is presented as a six-step intervention that guides the midwifery student through a process of debriefing with their peer. The feasibility of the tool resulted in an overarching theme labelled "I want this to mean something" and captures the therapeutic power of peer debriefing toward a meaningful outcome that fostered growth, and a deeper understanding of the profession.

Conclusion

Vicarious trauma is widely recognised as a core reason for midwives and midwifery students leaving the workforce. The peer debriefing tool helps midwifery students move through the process of recovering from adversity but also fostered learnings about midwifery practice and the profession. (Author)

Full URL: <https://doi.org/10.1016/j.nedt.2024.106167>

2024-05666

Working on Counseling Skills to Improve Nursing Undergraduates' Knowledge and Breastfeeding Professional

Self-Efficacy. Antoñanzas-Baztán E, Sola-Cía S, Lopez-Dicastillo O (2024), Journal of Perinatal Education vol 33, no 2, Spring 2024

Being well prepared and feeling confident when working with women who are breastfeeding is a challenge for many health professionals who need to be prepared to manage breastfeeding or any associated problems. The purpose of this study was to explore the changes in students' breastfeeding professional self-efficacy and knowledge after a workshop on breastfeeding counseling. The counseling workshop increased their knowledge ($p \leq .001$) and breastfeeding professional self-efficacy ($p \leq .001$) in the provision of labor support. Counseling skills help students to integrate the knowledge and feel more confident to provide breastfeeding care. (Author)

2024-05663

Social representations of breastfeeding in health science students: a first step to strengthening their training.

Grover-Baltazar GA, Sandoval-Rodríguez A, Macedo-Ojeda G, et al (2024), Nurse Education in Practice vol 78, July 2024, 103991

Aim

This study aims to describe the social representations of breastfeeding among Mexican health science students.

Background

Breastfeeding is a complex phenomenon involving biological, affective and sociocultural aspects. Its definition includes diverse beliefs, attitudes, traditions and myths. Being aware of the connections between biological and sociocultural concepts in the social representations of breastfeeding in health science students may facilitate our comprehension of their attitudes/behaviors towards breastfeeding.

Design

A qualitative study was carried out based on the structuralist approach of the social representations theory.

Methods

Data were collected with free-listing questionnaires with breastfeeding as an inducer word among a random sample of nutrition, medical and nursing undergraduate students ($n=124$). The analyses used were similitude/meanings of words, prototypical and categorical analyses.

Results

The findings suggest that the structure of the social representation is composed of breastfeeding essentials (baby, mother, & milk), affective (attachment, love & link), biological (nutrition, breasts, & health) and sociocultural elements (taboo, responsibility, & economic). Only instrumental elements are found in the nucleus, whereas biological, affective and sociocultural elements are observed in the peripheries. Moreover, emerging thematic categories such as the "affective bond" and "feeding" introduced additional dimensions, thereby emphasizing the

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complexity and richness of the social representation of breastfeeding in the context of health science students.

Conclusions

The structure of the social representation of breastfeeding among some Mexican undergraduate health science students focuses on the instrumental aspects, emphasizing essential elements. However, they downplay more scientifically oriented elements specific to their academic training. These findings, when extrapolated to different contexts, present an opportunity that could assist the development of tailored and culturally adapted educational strategies to strengthen breastfeeding training for health students. This approach can significantly contribute to enhancing breastfeeding promotion in society by addressing practical, scientific and language-inclusive aspects in the training of health professionals. (Author)

Full URL: <https://doi.org/10.1016/j.nepr.2024.103991>

2024-05662

Strategies and interventions used to provide communication education for midwifery students. A scoping review.

Rodríguez-Martín S, Greig Y, Shaw E, et al (2024), Nurse Education in Practice vol 78, July 2024, 103995

Aim

To examine the current literature on educational strategies and interventions developed with the objective of teaching or enhancing communication skills of student midwives during their pre-registration education programmes.

Design

A scoping review based on the Joanna Briggs Institute framework was conducted using predefined criteria and reported according to the Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) Checklist.

Methods

A comprehensive search was conducted using various databases (Medline, Cumulative Index to Nursing and Allied Health Literature (CINAHL), EMBASE, PsycINFO, Maternity and Infant Care Database (MIDIRS), Web of Science and Education Resources Information Centre (ERIC)) in October 2023.

Results

A total of 120 titles and abstracts were screened. A final number of eight articles were subjected to quality appraisal and included in the scoping review. Five themes were identified which describe educational strategies and interventions including: simulation-based training, the use of role-play, pedagogical approaches, theory-based information workshops and debrief and reflection.

Conclusions

This review highlights a gap in research focusing on the importance of communication skills training for student midwives throughout midwifery education. Despite the limited numbers of studies, different interventions and educational strategies have been recognized for enhancing these skills. To equip midwives with strong communication skills, a combination of interventions is recommended, including communication-focused workshops tailored for midwifery education and debriefing and student reflection sessions specifically designed to enhanced communication skills. (Author)

Full URL: <https://doi.org/10.1016/j.nepr.2024.103995>

2024-05455

UK student midwives' theoretical knowledge, confidence, and experience of intermittent auscultation of the fetal heart rate during labour: An online cross-sectional survey. Phillips K, Sanders J, Warren LE (2024), Midwifery vol 132, May 2024, no 103952

Aim

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This study aimed to explore student midwives' theoretical knowledge of intrapartum intermittent auscultation, their confidence in, and their experience of this mode of fetal monitoring.

Design and Setting

An online cross-section survey with closed and open questions. Descriptive statistics were used to analyse participants' intermittent auscultation knowledge, confidence, and experience. Reflexive thematic analysis was used to identify patterns within the free text about participants' experiences.

Participants

Undergraduate midwifery students (n = 303) from Nursing and Midwifery Council-approved educational institutions within the United Kingdom.

Findings

Most participants demonstrated good theoretical knowledge. They had witnessed the technique being used in clinical practice, and when performed, the practice was reported to be in line with national guidance. In closed questions, participants reported feeling confident in their intermittent auscultation skills; however, these data contrasted with free-text responses.

Conclusion

This cross-sectional survey found that student midwives possess adequate knowledge of intermittent auscultation. However, reflecting individual clinical experiences, their confidence in their ability to perform intermittent auscultation varied. A lack of opportunity to practice intermittent auscultation, organisational culture, and midwives' preferences have caused student midwives to question their capabilities with this essential clinical skill, leaving some with doubt about their competency close to registration. (Author)

2024-05345

Special Report: Life as an indigenous student away from base. Peleseuma C (2024), *The Student Midwife* vol 7, no 2, April 2024, pp 6-9

In this article, First Nations Student Midwife Courtney Peleseuma describes her experiences of studying midwifery remotely and how she combined studying with caring for her family. (JSM)

2024-04782

Midwives: Bullying [parliamentary debate]. House of Lords (2024), Hansard volume 837, 16 April 2024

Transcript of a debate which took place in the House of Lords on 16 April 2024, following a question from Lord Hunt of Kings Heath to His Majesty's Government, regarding what assessment they have made of the impact of bullying of students and newly qualified midwives in the NHS on (1) retention of staff, and (2) the treatment of pregnant women, as highlighted in the #Saynotobullyinginmidwifery report published on 12 November 2023. (JSM)

Full URL: <https://hansard.parliament.uk/Lords/2024-04-16/debates/OA14D707-73CE-4F30-B50C-0520461B0595/MidwivesBullying>

2024-04656

Broadening horizons: Unforgettable international placements. Sbaglia T (2020), *Australian Midwifery News* vol 22, no 1, Spring 2020, pp 54-55

Presents the experiences of an Australian student nurse-midwife whose placements took her to Bhutan for the nursing portion of her degree, and China for her midwifery studies. (JSM)

2024-04650

Preparing to transition to practice: a conversation with eight final year midwifery students. Bayes S, Brown J, Church S, et al (2020), *Australian Midwifery News* vol 22, no 1, Spring 2020, pp 41-43

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Explains the process involved for newly qualified midwives in Australia, transitioning from study to practice and the challenges they face. (JSM)

2024-04435

Perinatal death witnessed by midwifery students during clinical practice and their coping methods: A qualitative study. Sökmen Y, Koç Z (2024), Nurse Education Today vol 136, May 2024, 106135

Objective

The aim of this study was to determine the perinatal death experience of midwifery students during clinical practice and their coping methods.

Design

A qualitative, descriptive, phenomenological design was used.

Settings

The study was conducted with midwifery students.

Participants

The study was conducted with 14 midwifery students at a state university in northern Turkey between April and July 2023.

Methods

Perinatal death experiences that students witnessed during clinical practice and their coping methods were analyzed using the individual in-depth interview technique. Data were analyzed using the thematic analysis method. The results obtained from the study were reported according to the COREQ criteria.

Findings

As a result of the analysis, four main themes: (1) the perception of the concept of death, (2) the first encounter with death, (3) methods of coping with death, and (4) students' suggestions were elicited from the data. Students who witnessed perinatal death were affected by this situation, experienced negative emotions, and resorted to different methods to cope with their negative feelings about death.

Conclusions

Midwifery students who witnessed perinatal death were negatively affected emotionally and professionally; therefore, education and policy-oriented regulations are needed to cope with perinatal death. (Author)

2024-04024

Characteristics and Outcomes of Postgraduate Midwifery Fellowships: A Mixed Methods Study. Olsen JL, Farley CL (2024), Journal of Midwifery & Women's Health vol 69, no 4, July/August 2024, pp 483-490

Introduction

Postgraduate fellowships are growing in midwifery and yet are poorly understood by the profession. These fellowships are optional for midwives interested in developing advanced skills, transitioning to specialty practice, or entering or re-entering professional practice. The purpose of this study was to explore the characteristics and outcomes of US postgraduate midwifery fellowships as described by midwifery fellowship program directors.

Methods

Postgraduate midwifery fellowship programs in the United States were identified through an environmental scan and snowball sampling. Directors of these fellowship programs were invited to complete a survey and an open-ended interview to determine their program's characteristics and outcomes. Quantitative data were summarized, and thematic analysis was used to explore the qualitative data.

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Results

An environmental scan and snowball sampling identified 17 postgraduate midwifery fellowship programs. Thirteen fellowship program directors completed a survey (76.5%), and 11 completed an interview (64.7%). The findings identified program characteristics, including location, structure, funding, and educational offerings, of midwifery fellowship programs. The thematic analysis revealed the emergence of 3 themes highlighting the creation of support for midwives in transition, including new graduates and practicing midwives returning to practice after a hiatus or shifting to specialty practice: (1) stepping stones, (2) empowered and equipped, and (3) innovative future. Community birth practice was defined as specialty practice by these directors.

Discussion

The results of this study inform the profession of the availability of fellowships and the development of future high-quality midwifery fellowships. Postgraduate midwifery fellowships should not be required for entry to practice but have a place in the work-study opportunities available to US midwives. (Author)

2024-03893

The outcomes of team-based learning versus small group interactive learning in the obstetrics and gynecology course for undergraduate students. Sterpu I, Herling L, Nordquist J, et al (2024), *Acta Obstetrica et Gynecologica Scandinavica* vol 103, no 6, June 2024, pp 1224-1230

Introduction

Team-based learning (TBL) is a well-established active teaching method which has been shown to have pedagogical advantages in some areas such as business education and preclinical disciplines in undergraduate medical education. Increasingly, it has been adapted to clinical disciplines. However, its superiority over conventional learning methods used in clinical years of medical school remains unclear. The aim of this study was to compare TBL with traditional seminars delivered in small group interactive learning (SIL) format in terms of knowledge acquisition and retention, satisfaction and engagement of undergraduate medical students during the 6-week obstetrics and gynecology clerkship.

Material and methods

The study was conducted at Karolinska Institutet, a medical university in Sweden, and had a prospective, crossover design. All fifth-year medical students attending the obstetrics and gynecology clerkship, at four different teaching hospitals in Stockholm (approximately 40 students per site), in the Autumn semester of 2022 were invited to participate. Two seminars (one in obstetrics and one in gynecology) were designed and delivered in two different formats, ie TBL and SIL. The student:teacher ratio was approximately 10:1 in the traditional SIL seminars and 20:1 in the TBL. All TBL seminars were facilitated by a single teacher who had been trained and certified in TBL. Student knowledge acquisition and retention were assessed by final examination scores, and the engagement and satisfaction were assessed by questionnaires. For the TBL seminars, individual and team readiness assurance tests were also performed and evaluated.

Results

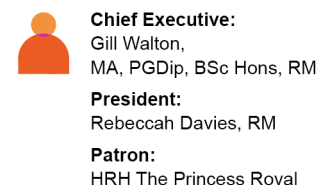
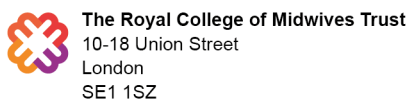
Of 148 students participating in the classrooms, 132 answered the questionnaires. No statistically significant differences were observed between TBL and SIL methods with regard to student knowledge acquisition and retention, engagement and satisfaction.

Conclusions

We found no differences in student learning outcomes or satisfaction using TBL or SIL methods. However, as TBL had a double the student to teacher ratio as compared with SIL, in settings where teachers are scarce and suitable rooms are available for TBL sessions, the method may be beneficial in reducing faculty workload without compromising students' learning outcomes. (Author)

Full URL: <https://doi.org/10.1111/aogs.14804>

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2024-03642

Student Midwives: Supporting Physical Activity Uptake in Pregnancy. Fisher K, Staras T (2024), The Practising Midwife vol 27, no 2, March 2024, pp 30-33

For healthy pregnant women, exercise, defined as physical activity (PA), is a safe and effective way of reducing adverse health risks. The lack of exercise reported by women in pregnancy is currently a significant concern, particularly in review of present maternal obesity statistics and associated risk factors. For instance, in pregnancy, obesity is recognised within 21.3% of antenatal clients. Adding to this, fewer than half of pregnant women (47.3%) have a normal ranged BMI. Urgent action is required, yet despite the well documented benefits, still 60 to 80% of pregnant women do not participate in PA. This is inclusive of women that are both overweight and classed as obese. From a health professional stance, there is an element of lack of professional education around the topic of PA in pregnancy. This article reviews the current obstacles and potential enablers, for midwives and student midwives. It critically considers how women and pregnant people can be effectively supported with PA throughout their pregnancy and, more specifically, by our future midwives. (Author)

2024-03638

Ethnicity and Academic Success in a Pre-Registration Midwifery Education Programme. Gnanapragasam S (2024), The Practising Midwife vol 27, no 2, March 2024, pp 22-26

Equality, diversity and inclusion are core values of both the National Health Service (NHS) and Higher Education healthcare training providers in the UK. It is clear however that there are disparities in course achievement outcomes between students depending on ethnicity. To what extent midwifery education specifically is impacted has to date not been established. This retrospective cohort observation study looked at the relationship between ethnicity of student midwives, and course outcome in a single higher education midwifery programme in the UK. Findings identify that ethnicity does not impact on course attrition rates but does predict the final degree classification attained. (Author)

2024-03454

A Reflective Account – Non-Pharmacological Management of Neonatal Abstinence Syndrome. Marcella D, Leroni J (2024), The Student Midwife vol 7, no 1, January 2024, pp 20-22

This reflection will use Gibbs' Reflective Cycle to undertake a critical account of my experience as a student midwife on a busy postnatal ward caring for a woman and her newborn baby who was being assessed for neonatal abstinence syndrome. My reflection focuses on the assessment of neonatal abstinence syndrome and how newborns can be supported through withdrawal with the use of nonpharmacological methods. The use of strength-based approaches by midwives to provide effective care and support of newborn babies, and the importance of interdisciplinary working when caring for vulnerable women and families is also highlighted. (Author)

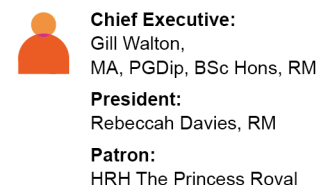
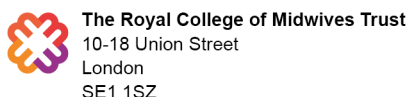
2024-03450

Positive Planning with The Happy Student Company – Prioritising Self-Care. Lee S (2024), The Student Midwife vol 7, no 1, January 2024, p 19

In the world of midwifery, providing optimal care to complex needs is not just a matter of technical skill but also one of emotional and mental well-being. Student midwives who prioritise self-care can increase their focus and effectiveness in caring for birthing families experiencing additional complexities.

Self-care is not a luxury but a necessity for those in the healthcare field. Student midwives, often faced with long hours and emotionally-charged situations, must prioritise self-care as the foundation of their ability to provide compassionate care. (Author)

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2024-03415

Midwives in Bali. Wood S, Duncan D (2023), Australian Midwifery News vol 34, Spring 2023, pp 50-51

Two midwifery students from the University of Newcastle share their experience of attending the International Confederation of Midwives Congress and a tour of midwifery facilities in Bali. (JSM)

2024-03392

Trainee midwife calls for student childcare support. Waple K (2024), BBC News 14 March 2024

News item featuring a trainee midwife and mother-of-three, who is calling on the government to extend childcare support to include parents who are in education. Explains that under current legislation 30 hours free childcare is offered to parents of three- and four-year-olds, but parents who are studying need to work at least 16 hours per week to qualify. Includes comments from a government spokesperson, detailing current arrangements and future plans, and Fiona Gibb from the Royal College of Midwives, who raises concern that almost 14% of midwifery students are not completing their courses. (JSM)

Full URL: <https://www.bbc.co.uk/news/articles/cml7k1e1eppo>

2024-03294

Reflections of a student midwife: has our role become misunderstood and how can we fix it?. Love I (2024), MIDIRS Midwifery Digest vol 34, no 1, March 2024, pp 9-12

As is the case for many who choose midwifery as a career, I started with the desire to be with women — to provide support and care.

When I share my chosen profession with loved ones and strangers, the automatic response is ‘so you deliver babies?’, encouraging the belief that our role is working in a labour ward. I have quickly become aware of the perception the public and other health care professionals have of what constitutes a midwife. These perceptions are limiting in relation to the many roles we have, including public health, specialities, research and education.

I believe one of the contributing factors to this perception is how the other arms of our profession are often overlooked, even within our own field of midwifery, with some individuals unaware of the alternative career routes.

From my experience, I have observed that many students are not informed of career options available in midwifery and those who are qualified don't always have a clear career framework to support their development and progression.

It is important to consider how, as a profession, we may be limiting the advancement of midwifery, as some midwives may not be pursuing alternative career options such as research, higher clinical practice (specialisms, advanced practice and consultant level practice) or working in academic settings (lecturers, researchers and professors, and clinical academics), since we may not fully understand what the challenges and barriers may be.

I will be using the Gibbs (1988) reflective cycle to explore my experience as a student midwife in relation to career development, and the potential barriers to and methods of facilitating improvement. (Author)

2024-03281

Being a student midwife with birth trauma: a reflection. Lowdean G (2024), MIDIRS Midwifery Digest vol 34, no 1, March 2024, pp 29-30


Before beginning to study to be a midwife, I worked in various advice and guidance roles where I was fortunate enough to be offered clinical supervision. When I commented to my supervisor that I had always secretly wanted to be a midwife, she immediately replied ‘Why is it a secret?’ At the time, I had no answer and her question emboldened me. (Author)

2024-03280


Could negative treatment of student midwives during training affect staff retention and care provisions for women and birthing people, families and neonates?. Marsh A (2024), MIDIRS Midwifery Digest vol 34, no 1, March 2024, pp 24-29

Background

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There is little published literature discussing the mental health and wellbeing of student midwives in relation to the clinical environment. However, it appears that many student midwives consider leaving the role because of poor mental health, which may have detrimental effects on the future maternity workforce. The crisis of maternity services is widely documented, with mental distress in midwifery students linked to an unsupportive, bullying and intimidating clinical environment, poor mentor relationships and high dropout rates.

Objective

This scoping review aims to explore whether negative treatment of student midwives during training can affect staff retention and, consequently, care provisions for women and birthing people, families and neonates.

Methods

A scoping review was conducted using CINAHL Ultimate, refined to five databases: AMED, ERIC, MEDLINE, MEDLINE with Full Text and CINAHL Ultimate. Inclusion and exclusion criteria were set. The data were analysed using Braun & Clarke's thematic analysis (2006) to identify and collate patterns and themes in the literature.

Results

Four articles were suitable for inclusion and, from these, three common themes on the experience of students were identified: workplace bullying, lack of identity, and mental health and wellbeing. Direct links have been found to connect high levels of attrition to negative treatment in clinical practice, contributing to the widely documented staffing crisis in maternity services. Moreover, an unsupportive and toxic learning environment has been shown to impact negatively on care provisions for women and birthing people, neonates and families.

Conclusion

There is little research into the experiences of student midwives in clinical practice, despite their being exposed to the same working conditions and environment as qualified midwives. The conclusion of this scoping review is that a direct link can be made between treatment of student midwives, and staff attrition and retention, leading to a further deficit in the maternity workforce. (Author)

2024-03277

Reflections on my four-year national PhD fellowship. Elliott-Mainwaring H (2024), MIDIRS Midwifery Digest vol 34, no 1, March 2024, pp 12-13

In early 2019, I felt that I was ready to start searching for PhD sponsorship. I reviewed the usual places: Find A PhD (findaphd.com) PhD Portal (www.phdportal.com) and Jobs.ac.uk (jobs.ac.uk/phd). (Author)

2024-03222


Simulation in midwifery: the role of motivation in designing an undergraduate experience. Stockdale J, Lawther L, Gillespie M, et al (2024), British Journal of Midwifery vol 32, no 3, March 2024, pp 146–154

Simulated learning is gaining momentum in midwifery education. Evidence shows that it offers multiple benefits for students, including improved decision making, empathy and interdisciplinary teamworking. Motivational theory can be used to design implementation of simulation at a curriculum level, which is an ongoing process of identifying and implementing appropriate design actions. Using motivational theory as a guide enables relevant actions to be identified for the implementation of simulated learning in midwifery, while also providing a theoretical basis for evaluating the impact of simulated learning in a midwifery curriculum. When implementing simulation, it is important to establish an expert working group, responsible for discussing the appropriate application of motivational learning theories when developing the key design actions. The aim of this article is to share how three main design actions were developed by a simulation expert working group, drawing on key motivational learning theories. (Author)

2024-02891

Connecting Canadian and Australian Midwifery Students Through a Global Peer-to-Peer Program. Johnston BK, Gum L, Hilsenteger E, et al (2023), Canadian Journal of Midwifery Research and Practice vol 22, no 2, Autumn 2023, pp 1-9

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Introduction: Pen-pal or peer-to-peer programs involving peer correspondence have been included within health professions education. However, there has been no published program for midwifery students in the literature. The Global Peer-to-Peer (GP2P) Program connected first- and second-year midwifery students in Australia and Canada to foster conversations that expanded socio-cultural knowledge to aid in their overall learning.

Methods: Program evaluations included comparing pre- and post-intervention surveys and midwifery student interviews. The surveys incorporated 5-point Likert scale questions and open-ended responses to assess students' baseline knowledge and exposure to global health topics and international midwifery practice. Midwifery students were invited to partake in interviews after completing the GP2P program to further discuss their experiences and thoughts about the program.

Results: Ten McMaster University and two Flinders University students completed the GP2P Program. Students commented on how beneficial it was to talk to students with similar interests internationally. The program also improved their understandings of global health topics, and international midwifery scope of practices, such as the similarities and differences between Canadian and Australian midwifery education and clinical practice. Some groups had difficulties communicating with each other and maintaining engagement in the study.

Conclusions: The GP2P Program was well received by midwifery students. Although there were issues with student engagement throughout the program, our pilot project would suggest that pen-pal programs within midwifery education could foster stronger international awareness and collaborations. Implications include further expansion of midwifery students' knowledge and attitudes, and providing new opportunities for future midwives to support pregnant people on a global scale. (Author)

2024-02861

Education and Certification. Koehn AR (2024), The Journal of Perinatal and Neonatal Nursing vol 38, no 1, January/March 2024, pp 98-100

This article is a column reviewing how education and certification fit the grand scope of prelicensure registered nurse (RN) and advanced practice registered nurse (APRN) practices. (JM2)

2024-02821

The exploration of professional midwifery autonomy: Understanding and experiences of final-year midwifery students. Vermeulen J, Buyl R, Luyben A, et al (2024), Nurse Education Today vol 134, March 2024, 106101

Background

The concept of professional midwifery autonomy holds great significance in midwifery education. Notably, clinical placements play a crucial role in introducing students to its concept. However, the understanding and experiences of students regarding midwifery autonomy are relatively unknown.

Objectives

This study aimed to examine the experiences and understanding of midwifery autonomy among final-year midwifery students.

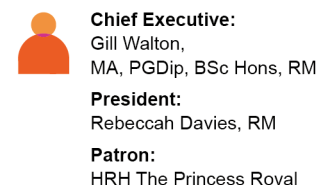
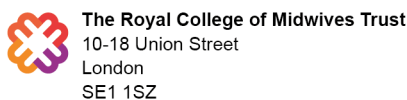
Methods

A qualitative exploratory study using three focus group interviews with final-year midwifery students from each of the three Belgian regions; Flanders, Walloon and the Brussels Capital Region. Focus groups were recorded, transcribed verbatim and analysed using a thematic analysis.

Results

Upon data analysis, five key themes emerged; 1) working independently, 2) positive learning environment, 3) professional context, 4) actions and decisions of others and 5) beneficial for women. Students emphasized the

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importance of promoting professional midwifery autonomy through the ability to make their own professional decisions and take initiatives. They highlighted the need for a safe and supportive learning environment that encourages independent practice, nurtures self-governance and facilitates personal growth. Additionally, collaborative relationships with other maternity care professionals and increased awareness among women and the broader healthcare community were identified as essential factors in embracing and promoting professional midwifery autonomy.

Conclusions

Our study provides valuable insights into the significance of midwifery autonomy among final-year midwifery students. To empower midwifery students to truly understand and experience professional midwifery autonomy, educators and preceptors should adopt strategies that enhance comprehension, foster independent yet collaborative practice, establish supportive learning environments, and equip students to navigate challenges effectively, ultimately improving maternal and new-born health. (Author)

2024-02819

An online communication skills education program for midwifery students: A quasi-experimental study. Baykal Akmeşe Z, Demir E, Oran NT (2024), Nurse Education Today vol 134, March 2024, 106070

Background

Communication and entrepreneurship skills, which have a very important place among the 21st century skills, are among the basic skills that a midwife should have.

Objective

This study was carried out to investigate the effect of the Communication Skills Education Program on the communication and entrepreneurship skills of the midwifery students.

Design

This study was designed a quasi-experimental study.

Settings

Online.

Participants

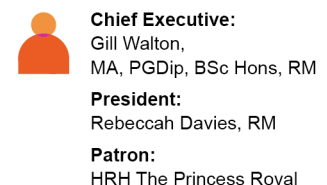
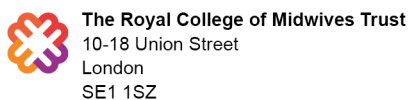
First grade Bachelor of Midwifery Science students (n = 117).

Methods

In this study, the Communication Skills Education Program was given to midwifery students. The Communication Skills Assessment Scale and University Students Entrepreneurship Scale were administered before the education program was implemented (pre-test), when the training program was completed (post-test), and six months after the education program was completed (post-test). Classified data were given in numbers and percentage distribution. Pearson correlation coefficient was used to determine the relationship between the variables. In order to test the significance of the difference between pre-test, post-test and follow-test the repeated measures Analysis of Variance (ANOVA) was performed.

Results: The mean age of the participating students was 19.46 ± 1.74 (min: 18.0, max: 31.0) years. While 8.5 % of the students received training on communication previously, 7.7 % of the students received education on entrepreneurship previously. Statistically significant differences were determined between the scores the students obtained at the pre-test, post-test and follow-up test [$F = 224.38, p = .00/F = 325.13, p = .00$]. The Bonferroni test performed to find out from which tests the difference stemmed demonstrated that there was a significant difference between the mean scores obtained at all the tests. According to the analysis of the relationship between the mean scores the students obtained from the scales, there was a moderately significant positive correlation only between

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their pre-test mean scores.

Conclusions

In conclusion, we determined that the Communication Skills Education Program improved the students' communication and entrepreneurship skills. (Author)

2024-02811

Block learning: Evaluation of a new teaching approach for nursing and midwifery education. Edward KL, Kruger G, Irvine S, et al (2024), Nurse Education in Practice vol 75, February 2024, 103905

Aim

The aim is to present outcome and engagement data from the initial years of the implementation of a new teaching approach in entry to practice nursing and midwifery education.

Background

The Block Model (TBM) is a teaching approach that involves studying one unit of study at a time over a four-week period, as opposed to the traditional semester model. This paper presents data revealing the impact of TBM on student engagement and overall experience in entry to practice Bachelor of Nursing and Midwifery programs.

Design

The evaluation retrospectively compared key indicators pre- Block Model implementation with outcomes for nursing and midwifery students using TBM approach using standard data sets and external comparators such as the Student Experience Survey and National Employability Survey.

Methods

The study presents a comparative analysis of key indicators and graduate outcomes for students. We use reportable data and two external comparators, the Student Experience Survey and the National Employability Survey, to gauge student learning and graduate employability. The evaluation was conducted in a tertiary institution in Australia with for nursing and midwifery students who completed their studies using TBM approach at the university.

Results

The implementation of TBM in nursing and midwifery programs resulted in improvements in learner engagement, retention rates and pass rates. Improvements were also noted graduate outcomes, with an increase in full-time graduate employment.

Conclusions

The results suggest the Block Model is a promising new teaching approach in nursing and midwifery education, with potential benefits for learner engagement, retention and pass rates. (Author)

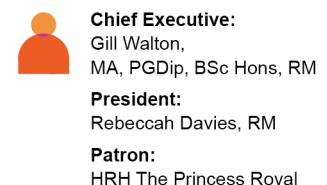
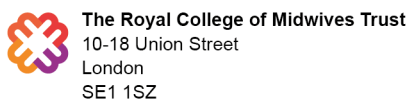
Full URL: <https://doi.org/10.1016/j.nepr.2024.103905>

2024-02678

Perinatal Mental Health Skills: Teaching and Learning Activities for Midwifery Students. Solanki K, Brown G, Fox D (2024), The Practising Midwife Australia vol 2, no 3, February 2024, pp 8-12

Supporting women with their emotional wellbeing is a core midwifery skill. Midwives have a pivotal role in early intervention and prevention by screening for mental health and psychosocial vulnerabilities, providing women with resources and referring them on to appropriate services as needed. It has been identified that midwives frequently lack the confidence and perceived competence to offer emotional care to women and require ongoing professional development in their knowledge of perinatal mental health, communication and assessment skills, and their attitudes to mental illness. (Author)

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2024-02578

Laid-back breastfeeding: knowledge, attitudes and practices of midwives and student midwives in Ireland. McGuigan M, Larkin P (2024), International Breastfeeding Journal vol 19, no 13, February 2024

Background

Despite concerted efforts by policy developers, health professionals and lay groups, breastfeeding rates in Ireland remain one of the lowest in world, with 63.6% of mothers initiating breastfeeding at birth, dropping to 37.6% of mothers breastfeeding exclusively on hospital discharge. Nipple trauma and difficulties with baby latching are major contributors to the introduction of formula and discontinuation of breastfeeding. Research shows laid-back breastfeeding (LBBF) significantly reduces breast problems such as sore and cracked nipples, engorgement, and mastitis as well as facilitating a better latch. Although the benefits of LBBF are well documented, this position does not seem to be routinely suggested to mothers as an option when establishing breastfeeding. This study aims to determine midwives' and student midwives' knowledge, attitudes, and practices of using laid-back breastfeeding in Ireland.

Method

A cross-sectional descriptive survey distributed to midwives and student midwives in three maternity hospitals in Ireland and two online midwifery groups based in the Republic of Ireland, during June, July, and August 2021.

Results

Two hundred and fifty-three valid responses were received from nine maternity units. Most participants (81.4%) were aware of laid-back breastfeeding. However, only 6.8% of respondents cited it as the position they most frequently use. Over one-third (38.34%) had never used this position with mothers. Those more likely to suggest LBBF had personal experience of it, were lactation consultants or working towards qualification, or had participated in specific education about LBBF. Barriers included lack of education, confidence, time, and experience. Further issues related to work culture, a tendency to continue using more familiar positions and concerns about mothers' anatomy and mothers' unfamiliarity with LBBF.

Conclusion

Although there was a high level of awareness of laid-back breastfeeding among midwives and student midwives, there are challenges preventing its use in practice. Education specifically related to using LBBF in practice is required to overcome the barriers identified. A greater understanding of mothers' and babies' intrinsic feeding capacities may give midwives more confidence to recommend this method as a first choice, potentially leading to more successful breastfeeding establishment and maintenance. (Author)

Full URL: <https://doi.org/10.1186/s13006-024-00619-y>

2024-02158

The influence of ethnicity on assessments and academic progression in a midwifery degree. Gnanapragasam S (2024), British Journal of Midwifery vol 32, no 2, February 2024, pp 58–63

Background/Aims

Midwifery degrees require students to study for 3 years, during which they are assessed both academically and in practice placements. This study's aim was to explore year-by-year associations between assessment grades and students' ethnicity as they progressed through their degree.

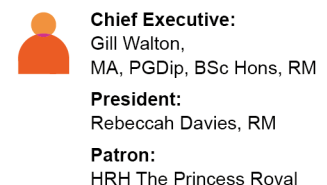
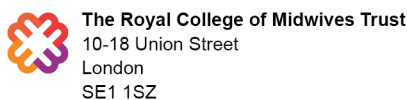
Methods

Retrospective data collected at a single university in the UK were analysed using descriptive statistics. The cohort and variables were stratified by student ethnicity, year of study and assessment grades given for academic work and placement practice assessments.

Results

While Black, Asian and minority ethnic students started with lower practice assessment grades in year 1, this

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improved such that there was no difference in attainment by year 3. In contrast, university academic grades were consistently lower for Black, Asian and minority ethnic versus White students, and this pattern did not change throughout the degree programme.

Conclusions

The likely factor in lower final degree outcomes among Black, Asian and minority ethnic students is not from practice assessments but academic performance. Targeted interventions that recognise different learning styles and educational experiences in the university environment may address and improve this inequality in attainment.

(Author)

2024-01385

Development of the essential learning outcomes for the midwifery student continuity of care learning model: A

Delphi study. Tierney O, Vasilevski V, Kinsman L, et al (2024), *Women and Birth: Journal of the Australian College of Midwives* vol 37, no 3, May 2024, 101582

Background

In Australia, midwifery students are required to undertake at least ten Continuity of Care Experiences (CoCE) during their education. The learning outcomes of this experience have never been explicit or standardised resulting in inconsistent assessment.

Aim

To develop and identify standardised learning outcomes for the CoCE.

Methods

A modified Delphi survey was conducted with an expert panel. Intended learning outcome statements were developed, reflecting the learning objectives identified in a previous study. Bloom's taxonomy levels of thinking complexities guided the wording of the outcomes. Participants were asked to rank and rate their level of agreement with each statement over two survey rounds.

Findings

Round one was completed by 32 participants, with 92.5% of the 40 statements reaching consensus. The second round was completed by 23 participants, with 70.7% of the 33 statements reaching consensus. Content analysis of participant comments from each round identified duplicates that were removed and informed refining the wording of some statements. A final set of 15 learning outcomes were agreed upon. The outcomes were broadly grouped within the themes of accountability, advocacy, and autonomy.

Discussion

This study has identified agreed learning outcomes for midwifery students undertaking CoCE. The consensus agreement of experts reinforced the learning model enables the development of woman-centred practice that is underpinned by accountability, advocacy, and autonomy.

Conclusion

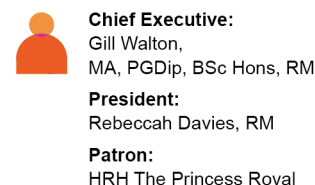
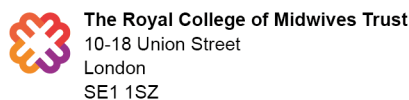
Purposeful learning outcomes for the CoCE have been developed, informing how the model can be embedded in curricula, guide student learning and assessment to standardise the pedagogy of the model to prepare future midwives. (Author)

Full URL: <https://doi.org/10.1016/j.wombi.2024.01.008>

2024-01128

Navigating interprofessional boundaries: Midwifery students in Canada. Neiterman E, HakemZadeh F, Zeytinoglu IU, et al (2024), *Social Science and Medicine* vol 341, January 2024, 116554

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The literature on professional socialization focuses on how students adopt and internalize professional identities and values, and assumes that boundary work is essential to learning how best to practice their profession. However, a focus on boundary work in the context of midwifery training - which is embedded in the gendered and hierarchical landscape of maternity care - is lacking. Thus, this article examines how Canadian student-midwives learn to navigate and negotiate interprofessional boundaries. Grounded in a symbolic interactionist approach, it draws on 31 semi-structured qualitative interviews from a mixed-methods national study on midwifery retention, explores how midwifery students make sense of the tensions among midwives, physicians, and nurses, and describes what strategies they utilize when navigating boundaries. Our analysis, based in constructivist grounded theory, revealed that participants learned about interprofessional tensions in clinical placement encounters via direct or indirect interactions with other healthcare professionals, and that strategies to navigate these tensions included educating others about midwifery training and adopting a learner identity. This article proposes that the process of professional socialization enables to reshape professional boundaries and that students are not only learners but also agents of change. These findings may yield practical applications in health education by highlighting opportunities for improving interprofessional collaborations. (Author)

2024-01125

Student midwives' lived experiences of caring for bereaved parents following perinatal loss using actor-based simulation: A phenomenological study. Leyland A, Choucri L (2024), *Midwifery* vol 130, March 2024, 103913

Background

Student midwives frequently encounter bereaved parents in clinical practice; however, the experience of caring for bereaved parents can be a significant source of traumatic stress. Although the use of simulation to teach bereavement care is considered a powerful experiential form of learning, evidence for its effectiveness as a transformative learning strategy is limited.

Aim

To explore student midwives' lived experience of caring for bereaved parents experiencing perinatal loss using high-fidelity simulation.

Design

Students midwives participated in an actor-based bereavement simulated scenario. Data was collected using semi-structured interviews. Interpretative Phenomenological Analysis was conducted to gain a deep understanding of the meaning of the experience. Mezirow's Transformative Learning Theory was applied as an analytical framework to illustrate how the student midwives made sense of and learned from the experience of caring for bereaved parents experiencing perinatal loss.

Setting

One BSc (Hons), 156-week undergraduate midwifery programme within a university in the Northwest of England.

Participants

A purposeful sample of nine first-and second-year student midwives volunteered to participate in the study.

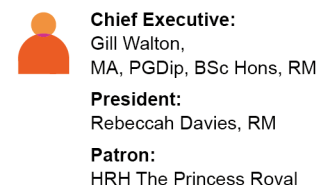
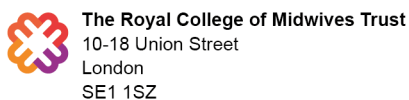
Findings

One of the superordinate themes that emerged from the analysis (1) 'trying to console and making things easier' and the related subthemes (1a)'what words can I say', (1b)'my instinct was to console the mum', (1c)'left to sort of pick up the pieces' captured the deep sense of powerlessness and the professional dilemmas experienced as students struggled to emotionally console and communicate the right words to say to the grieving parents.

Conclusion

The study highlights the vital role of simulation as a defined model of bereavement education that equips students

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with the necessary knowledge, skills, and confidence to provide compassionate care to bereaved parents experiencing perinatal loss.

Implications for practice

The emotional toll of caring for bereaved parents is significant, and higher education institutions should adopt experiential forms of learning using actor-based simulation scenarios to emotionally prepare students to care holistically for parents affected by perinatal loss. (Author)

2024-00731

Struggling to keep afloat. Bonar S (2024), *Midwives* vol 27, January 2024, pp 44-45

Royal College of Midwives' (RCM's) public affairs advisor Stuart Bonar takes a look at financial support for students. (Author, edited)

2024-00698

Generation next. Anon (2024), *Midwives* vol 27, January 2024, pp 12-13

The inaugural Royal College of Midwives (RCM) student conference gave students and newly qualified midwives (NQMs) the opportunity to listen and learn from experienced speakers. (Author, edited)

2024-00620

Student nurse-midwives' knowledge and practice conducting normal labour in Windhoek, Namibia. Mateus I, Emvula O, Nashandi HL (2023), *African Journal of Midwifery and Women's Health* vol 17, no 4, October 2023

Background/Aims

It is crucial that maternity health workers understand how to prevent complications during labour. A lack of knowledge and the skills required to manage uncomplicated physiological labour ('normal' labour) may result in unanticipated complications, such as vaginal lacerations and perineal tears. This study's aim was to assess the knowledge and practices of undergraduate nurse-midwife students at the University of Namibia in conducting normal labour.

Methods

This quantitative study used a descriptive, non-experimental design to gather data from a total of 64 student nurse-midwives. A questionnaire was used to gather participants' sociodemographics and assess their knowledge and practice of normal labour. Descriptive statistics were used to analyse the data.

Results

The majority of the participants (87.3%) knew the correct supporting technique to prevent perineal tears. Most (84.1%) correctly indicated that a partograph is used to monitor labour progress. However, the majority (87.3%) did not practice episiotomy to prevent perineal tears.

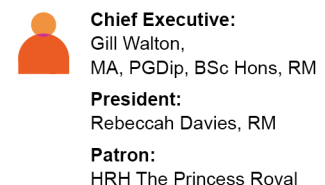
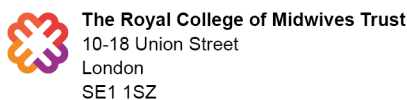
Conclusions

Most students were knowledgeable on the use of a partograph, practices to prevent perineal tears and care of a newborn after birth. Students should receive continual education during clinical allocations, and be supervised and guided to improve practice and competency. Provision of sufficient preceptors is needed to cater for the high number of students. Future research should be conducted on the experiences and perspectives of students on conducting births and prevention of labour complications. (Author)

2024-00603

Building strong foundations in leadership and management for midwifery students. Abdul-Rahim HZ, Sharbini SH, Ali M, et al (2024), *British Journal of Midwifery* vol 32, no 1, January 2024, pp 38-44

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This article explores the importance of leadership and management for midwifery students in their preparation to become midwives. The article combines a review of the existing literature, reflection on the authors' experiences and feedback from midwifery students on leadership and management modules at a university in Brunei Darussalam. Leadership and management skills are essential, and a requisite for every midwife to ensure coordination of structured, safe and high-quality midwifery care. Some important leadership and management competencies include decision making, managing resources, teamwork, collaborating effectively with other healthcare professionals, delegating tasks appropriately and efficient time management. Stakeholders in midwifery education, including educational institutions, public and private healthcare systems and women using midwifery services, expect newly graduated midwives to possess these foundational leadership and management proficiencies so that they can immediately perform their duties when they begin their new role as qualified midwives. (Author)

2024-00602

Midwifery higher education: who are we and who do we teach?. Chenery-Morris S, Divers J (2024), British Journal of Midwifery vol 32, no 1, January 2024, pp 32–37

This is the first article in a series of six inspired by themes arising from the Royal College of Midwives' State of Midwifery Education report. These articles will explore the current landscape and challenges in educating the future midwifery workforce, particularly those that pertain to the higher education workforce. This first article introduces the concept of a profession using sociological theories. It considers who we are individually, as authors, academics and midwives, and collectively considers our identity as a profession alongside those whom we teach. The aim is to ensure that staff and students are supported to succeed and thrive. Education can transform lives, so that current and future midwives can make a difference in providing safe, compassionate care for service users. (Author)

2024-00600

Student midwives' experiences of clinical placement and the decision to enter the professional register. McNeill M, Kitson-Reynolds E (2024), British Journal of Midwifery vol 32, no 1, January 2024, pp 14–20

Background/Aims

In addition to the high rate of attrition among registered midwives, student midwives are increasingly likely to choose to leave their programme, decreasing the projected number of midwives who would join the NHS. The aim of this study was to understand how students experience clinical practice and if these experiences affect their decision to enter the professional register.

Methods

Seven student midwives who had experienced clinical placement as part of their pre-registration training were invited to attend semi-structured interviews. Data were analysed following an interpretive phenomenology approach, where descriptive, linguistic and conceptual comments on the transcripts were used to identify emergent themes.

Results

The 79 identified themes were categorised into five sub-themes within two super-ordinate themes: 'kindness and compassion grows future midwives and strength' and 'resolve through COVID-19 and beyond'. The overarching theme from the participants' interviews was 'I can be a good midwife when I qualify'.

Conclusions

Students want to feel like they will be good midwives, which will be achieved with positive attitudes and behaviours towards them from senior staff during clinical placements. Staff involved with the care of women and newborns should ensure they show students civility and patience while teaching and supporting them. Understanding the level of knowledge that students possess can make it simpler for staff to recognise what each student may or may not have been exposed to. (Author)

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2024-00532

NMC to launch review into practice learning requirements. Devereux E (2024), Nursing Times 9 January 2024, online
The Nursing and Midwifery Council (NMC) will commission a review into nursing and midwifery students' practice learning requirements across the UK, it has been announced. (Author)

2024-00386

Status and influencing factors of undergraduate midwifery students' core competencies: A cross sectional study.

Wang Y, Yang Y, Wang X, et al (2024), Nurse Education Today vol 133, February 2024, 106042

Introduction

Midwifery undergraduate students' core competencies directly affect the quality of midwifery services and overall quality of midwifery teams. However, limited research has explored the core competencies of undergraduate midwifery students in China.

Objectives

This study aimed to describe the level of core competencies among undergraduate midwifery students in China and investigated possible associated factors.

Design

This was a cross-sectional descriptive study.

Settings and participants

The study population comprised third- and fourth-year undergraduate midwifery students at Zunyi Medical University in Guizhou Province in southwest China (n = 207, response rate 94.1 %).

Methods

Data were collected using an online survey that included a general information questionnaire, a general self-efficacy scale, and a core competencies self-assessment questionnaire for midwifery undergraduates. Data were statistically analyzed using SPSS 18.0. Pearson's correlation analysis was used to explore the relationship between self-efficacy and the core competencies. Stepwise multiple linear regression was used to explore influencing factors.

Results

The total score for the core competencies among midwifery undergraduates was 118.46 (8.97). The highest mean score was for professional attitude, 4.21 (0.43), and the lowest was for professional skills, 3.70 (0.30). We found a positive association between self-efficacy and core competencies ($r = 0.251$, $P < 0.01$). Grade ($\beta = 0.261$, $P < 0.01$), scholarship ($\beta = -0.231$, $P < 0.01$), work intention ($\beta = -0.135$, $P < 0.05$), and self-efficacy ($\beta = 0.207$, $P < 0.01$) significantly influenced undergraduate midwifery students' core competencies ($R^2 = 0.189$, adjusted $R^2 = 0.173$, $F = 11.775$, $P < 0.001$).

Conclusions

Undergraduate midwifery students showed moderate core competencies, indicating room for improvement. Fourth-grade midwifery students had higher core competencies than third-grade students. Additionally, scholarship, work intention, and self-efficacy were significant influencing factors. Midwifery educators should examine students' core competencies and explore targeted interventions, particularly for those with low self-efficacy and core competencies. (Author)

2024-00376

Mentorship needs in an intrapartum setting – mentor-centred approach: A qualitative descriptive study. Mathope K, du

Preez A, Scheepers N (2023), Nurse Education in Practice vol 71, August 2023, 103727

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Aim

The study aimed to explore and describe the needs of registered midwives in labour rooms in the North-West Province of South Africa with regard to clinical mentorship of student midwives to identify the strengths and gaps in the clinical mentorship programme and make recommendations to optimise clinical mentorship for student midwives in this setting.

Background

The South African healthcare system is overburdened by numerous problems, particularly in maternity services. It has been reported that nurses are not skilled enough to provide quality care to pregnant women. The onus is on nursing education institutions to produce competent midwives to improve the quality of care. Mentorship has been proven to improve competence among mentees and this strategy can be used to address this health problem in South Africa.

Design

The study employed a qualitative descriptive design and purposive sampling was used to select the participants from the level 2 hospitals in the North-West province in South Africa.

Methods

Data were collected using individual telephonic interviews and 14 participants from three level 2 hospitals in the North-West province participated in the data collection process.

Results

Three main themes emerged from interviews conducted with the participants. Their needs to successfully mentor student midwives in an intrapartum setting are a positive environment for learning, teaching and mentorship; a collaborative relationship between the nursing education institutions and the health facilities where they are employed as well as positive student conduct. The sub-themes under theme 1, a positive environment for teaching, learning and mentorship, are patience, teamwork, mutual respect and human and material resources. Theme 2, a collaborative relationship between the nursing education institutions and the health facilities, had three sub-themes, namely, presence, effective communication on students' objectives, activities and progress and opportunities for self-development and empowerment. Commitment to learning (presence, patience and pre-knowledge) is the sub-theme that emerged from the theme of positive student conduct.

Conclusions

For successful mentorship in the clinical setting, the focus should not just be on the mentees themselves and creating an environment where they can learn. There is a need to look into how the mentors, who provide learning opportunities and teach, guide and support mentees in order for them to be competent, can be assisted to enjoy mentorship. (Author)

2024-00373

Contextual factors influencing implementation of a university-based midwifery education programme in Central Africa: A qualitative study. Berg M, Lalloo EC, Ngongo FK, et al (2023), Nurse Education in Practice vol 71, August 2023, 103720

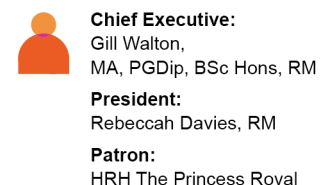
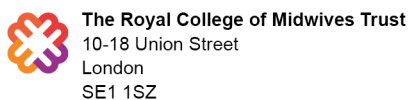
Aim

To investigate contextual factors and their influence on implementing a 90-credit midwifery education programme for nurses at a university in the eastern DRC.

Background

To improve maternal and neonatal health, there is a government policy in the Democratic Republic of Congo (DRC) to educate midwives at a higher education level according to international norms. This study investigates contextual factors and their influence on the implementation of a midwifery education programme which is based on national curriculum and has a profile of person-centred care, simulation-based learning pedagogy and information and

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communication technology.

Method

A qualitative study was conducted with data collected through semi-structured interviews with 22 participants who were directly or indirectly involved in establishing the midwifery education programme. Transcribed interviews were analysed using content analysis.

Results

The factors influencing the implementation of the new midwifery education programme comprise facilitating and hindering factors. Facilitating factors were: (i) awareness that midwives educated at a higher education level can deliver higher-quality health care, (ii) women are motivated to seek care from well-educated midwives, (iii) the planned programme is attractive and (iv) the university has a stable academic administration and established collaborations. Hindering factors were: (i) Students' lack of prerequisites for study; (ii) objections to educating midwives at a higher education level; (iii) inadequate teaching resources; and (iv) inadequate working conditions for midwives.

Conclusion

The facilitating factors strengthen the belief that it is possible to implement this midwifery education programme, while the hindering factors need to be addressed to run the programme successfully. The findings can guide higher education institutions starting similar midwifery education programmes in the DRC and elsewhere, although it is crucial to conduct a context study in those specific contexts. (Author)

Full URL: <https://doi.org/10.1016/j.nepr.2023.103720>

2024-00370

The Turkish version of the students' perceptions of respectful maternity care scale: An assessment of psychometric properties. Çamlıbel M, Uludağ E (2023), Nurse Education in Practice vol 70, July 2023, 103684

Aim

The aim of the research was to evaluate the psychometric properties of the Turkish validity and reliability of the Students' Perceptions of Respectful Maternity Care (SP-RMC) scale.

Background

Respectful maternity care is an important contributor to intrapartum care quality and maternal birth satisfaction. Determining students' perceptions of respectful maternity care can identify knowledge gaps and inform their future practice.

Design

A descriptive, methodological and cross-sectional design was used.

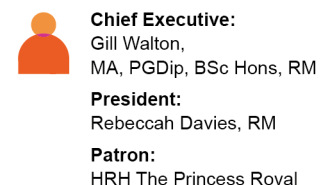
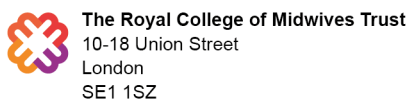
Methods

This study was conducted with 226 undergraduate nursing and midwifery students in the western region of Turkey. Data were collected between May and December 2022 from students who completed their birth courses (theory and clinical practicum). Data included sociodemographic details and the Students' Perceptions of Respectful Maternity Care scale (Turkish version). Factor analysis, Cronbach's alpha and item-total score analyses were conducted.

Results

The mean age of the students was 21.88 (SD 1.39). The average number of births observed was 2.57 (SD 3.16). The scale comprised 18 items including three subdimensions. In both exploratory and confirmatory factor tests, the overall factor loading was greater than 0.30, and the total explained variance was 64.89%. The Cronbach's alpha coefficient of the scale was 0.91, with Cronbach's alpha values ranging between 0.80 and 0.91 for the subscales. Pearson correlation coefficients of all the items ranged between 0.42 and 0.78.

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Conclusions

The SP-RMC (Turkish version) is a valid and reliable measure, with 18 items and three dimensions. In this regard, measuring and reporting respectful maternity care perceptions and intrapartum care experiences of students, who are future members of the profession, could contribute to the improvement of the quality of care and the development of educational interventions for behavioral changes. (Author)

2024-00369

The implementation and evaluation of a mentoring program for Bachelor of Midwifery students in the clinical practice environment. Sheehan A, Dahlen HG, Elmir R, et al (2023), Nurse Education in Practice vol 70, July 2023, 103687

Aim

To describe the implementation and evaluation of a midwife/midwifery student-mentoring program in one Local Health District in Sydney NSW Australia.

Background

Evidence suggests well designed and supported midwife/midwifery student mentorship programs can make a difference to the clinical placement experiences and attrition rates of midwifery students.

Design

In the evaluation of the mentoring program, we used surveys, focus groups and individual interviews.

Methods

Eighty-six participants, including midwife mentors, midwifery students, non-mentor midwives and midwifery managers participated in the evaluation. Quantitative data were analysed using descriptive statistics and qualitative data, content analysis.

Results

The mentoring program increased midwives' mentoring skills and was beneficial to their professional growth and leadership skills. Students reported positive outcomes including someone to talk to, emotional support and a sense of belonging. Mentoring programs require structure, mentor training, organisational support and transparency.

Conclusion

The mentoring program provided benefits to both midwifery mentors and students and demonstrated the value of a structured and supported mentoring program for midwifery students. (Author)

Full URL: <https://doi.org/10.1016/j.nepr.2023.103687>

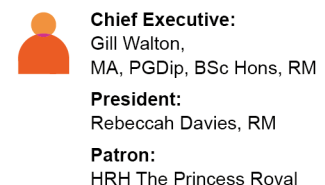
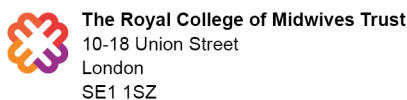
2024-00366

Promoting patient safety using electronic medical records in nursing/midwifery undergraduate curricula: Discussion paper. Mollart L, Irwin P, Noble D, et al (2023), Nurse Education in Practice vol 70, July 2023, 103653

This discussion paper highlights the importance of Australian nursing and midwifery students' lack of exposure to electronic medical records during their undergraduate programs. There is pressure on universities offering nursing and midwifery programs to provide students with opportunities to learn to use patient electronic medical records. This will provide authentic rehearsal with the digital technology prior to clinical placements and increase graduate work readiness.

Informed by contemporary literature, we describe the benefits of implementing electronic medical records (eMR) in health organisations and identify the challenges and barriers to implementing and integrating the education of electronic records into undergraduate nursing and midwifery programs. Undergraduate students who had not experienced eMR as part of on-campus learning felt unprepared and lacked confidence when commencing clinical

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practice. Some international nursing and midwifery programs have found that student's skills improve in decision-making and documenting patient observations when eMR is integrated into their university education program. Successful integration of an eMR program should consider academic/teaching staff skills and confidence in technology use, initial and ongoing costs and technical support required to deliver the program.

In conclusion, Australian universities need to embed eMR learning experiences into the nursing and midwifery undergraduate curricula to increase students work-readiness with a focus on patient safety. (Author)

2023-13556

Facing Fear: A First-Year Student Midwife's Perspective. Fucella R (2023), *The Student Midwife* vol 6, no 4, October 2023, pp 6-9

Fear. It is one of the most gripping and visceral of human emotions. But what place, if any, does fear have within maternity care? As a first-year student midwife, fear appears to be an overwhelming theme, splashed across newspaper headlines and hotly debated in lectures halls. This article aims to critically discuss sources of this fear, amongst users of maternity services and within the midwifery profession itself – and look to some of the solutions to overcome it. Professional midwifery stands at a crossroads, with global goals driving improvements in practice, while the complex challenge of fear threatens to cripple progress if not responded to with hope. (Author)

2023-13540

Improving Student Experience Through Leading with Compassion. Brown S (2023), *The Practising Midwife* vol 26, no 11, December 2023, pp 10-15

To develop a sustainable workforce, future midwives need to recognise that their wellbeing is paramount and that they are valued and important. Leading with compassion in midwifery education through supporting student wellbeing and enabling psychological safety is key to transforming midwifery, midwifery education and maternity services. This article explores elements of compassionate leadership in midwifery education that may work to improve student experience. (Author)

2023-13403

Turkish Validity and Reliability Study of Midwifery Student Evaluation of Practice (MidSTEP) Tool. Aktaş D, Yılmaz S (2024), *Midwifery* vol 129, February 2024, 103907

Background

In midwifery education, clinical learning environments have a significant impact on students' acquisition of clinical competence and professional self-identity. The Turkish version of the MidSTEP can be used as a measurement tool to assess midwifery students' perceptions of their clinical learning environment experiences and the positive effects of preceptor on the professional development of midwifery students.

Aim

This research was conducted to determine the Turkish validity-reliability of MidSTEP.

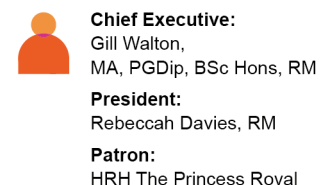
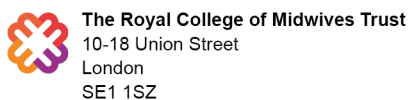
Method

This research, which was designed as a methodological study, was conducted with volunteer students studying in the first, second, and third years of midwifery at a university in Turkey. The MidSTEP consists of the Clinical Learning Environment Scale and Impact of the Midwifery Preceptor Scale, each with two subscales. The validity and reliability of the MidSTEP were assessed using Exploratory Factor Analysis, Cronbach's alpha, and Intraclass Correlation Coefficient.

Participants

In this study, 205 students were included in the research sample, considering that it may not be sufficient to reveal the factor structure when the number of scale items and the sample size is less than 200.

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Results

As a result of the factor analysis a 26 item measurement tool of two scales and each with two sub-dimensions was achieved. The Turkish version of the MidSTEP Tool matched the original scale in terms of the number of items and factor structure.

Conclusions and implications for practice

The Turkish version of the MidSTEP is a valid and reliable instrument. The measurement tool can confidently be used in undergraduate midwifery clinical education. (Author)

2023-13348

Incubating Collaboration for a Neonatal Scholars Writing Group. Dudding KM, Shorten A, Bordelon C, et al (2023), Neonatal Network vol 42, no 6, November 2023, pp 336-341

One method to improve writing and scholarship is through the formation of writing teams. While not new, we will present our innovative strategy for creating an effective neonatal writing team for faculty and students. Tuckman's Model of Team Development was used to guide our group through the five stages of effective teams including forming, storming, norming, performing, and adjourning to develop an effective writing group. The application of this model facilitated a strong foundation for our writing group, the Neonatal Scholars Interest Group, through the intentional movements through developmental stages and the ability to sustain our writing group. Furthermore, the impact of our writing group, as a model, resulted in several other specialized writing groups within our school. Our writing group improved the knowledge and skills of nurse faculty and students in sustained writing efforts through successful scholarship dissemination, mentoring students, and advancing nursing education and practice. (Author)

2023-13339

Midwifery students' opinions about episiotomy training and using virtual reality: A qualitative study. Demir-Kaymak Z, Turan Z, Çit G, et al (2024), Nurse Education Today vol 132, January 2024, 106013

Background

The use of simulations and digital technologies in education in the health field is common. Virtual reality technologies, which offer three-dimensional (immersive) simulation environments, have become easily accessible and cost-effective in recent years and this has increased this use of this technology in educating students who will work in the health field.

Objectives

The aim of the study was to investigate the views of midwifery undergraduate students about the current episiotomy education they received and their expectations when related education is given with virtual reality technology.

Participants

Students in their third or fourth year of undergraduate midwifery who have taken prior episiotomy education.

Design

The research was carried out as a phenomenological design for qualitative research. Data were collected between December 2022 and January 2023 at a public university in Türkiye, with institutional ethical approval.

Methods

Participants were asked open-ended questions to collect qualitative data. Data were analysed using content analysis by MaxQDA.

Results

Data were analysed, and four main themes were determined. These main themes consisted of 16 sub-themes, and

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included midwifery department students' positive and negative opinions about the current episiotomy education and their expectations in cases where the education is carried out using virtual education environments.

Conclusions

Although the current episiotomy education has positive aspects, such as suturing ability, it does not give a sense of reality, is not repetitive, and has many negative aspects, such as cost. It was determined that in virtual reality episiotomy education environments, students' expectations are similar to the real birth environment, and they have expectations of simulating risky situations because they think it will be more useful. (Author)

2023-13338

Discursive constructions of student midwives' professional identities: A discourse analysis. McLuckie C, Kuipers Y (2024), Nurse Education in Practice vol 74, January 2024, 103847

Background

The construction and performance of professional identity is significant to broader socio-cultural understandings of who 'professionals' are and what they do. Importantly, it is also implicated in the development and enactment of policy, regulation, education, and professional practice. Professional identity is linked to self-esteem, self-efficacy, professional value, confidence and success. The salience of this in relation to midwifery practice is highly significant; aspects of autonomy, confidence, competence, responsibility, and accountability are all implicated in the provision of safe and effective care.

Aim

To explore how student midwives are constructed in the discourses of policy, professionalism, and learning, to provide new perspectives to inform, policy, education, and practice.

Methods

An adapted critical discourse analysis of the United Kingdom (UK) Nursing and Midwifery Council's 2009 Standards for pre-registration midwifery education, using a three-step process: exploring discourse at the level of (1) discursive practice (2) linguistic features of the text, and (3) social practice.

Findings/ Discussion

The discourses that relate to midwifery education and practice emerge within socio-political and historical contexts. Constructions of identity are articulated through a rule-bound framework which includes competence, confidence and 'good health and good character'. There is a requirement for midwives to 'be' responsible, accountable, autonomous, professional, competent, and confident. Regulatory power is reinforced through medico-legal discourses, with the status of midwifery discursively presented as inferior to medicine.

Conclusion

According to the Standards, midwives must be a lot of things in their role and function. The Standards' discourses are authoritative, legislative and controlling, creating an ideology about professional status and agency which constructs an 'imaginary autonomy'; becoming a midwife is more automatic (with the perception of control), than agentic. All of which has significance for the social practice of midwifery.

Tweetable abstract

'How are midwives made? Discursive constructions of student midwives' professional identities: a discourse analysis.

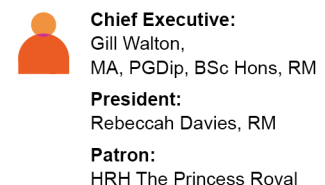
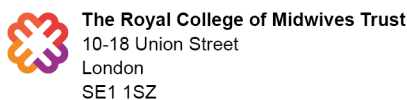
(Author)

Full URL: <https://doi.org/10.1016/j.nepr.2023.103847>

2023-13337

Midwifery students' perceptions of clinical learning experiences and midwifery preceptors in Turkey. Yılmaz S, Aktaş D

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Background

The clinical education environment presents a valuable opportunity for students to learn, acquire and develop the clinical skills essential for professional midwifery practice. The presence of competent and relevant preceptors plays a pivotal role in ensuring the success of midwifery students and fostering positive clinical experiences.

Aim

This study was conducted to evaluate the clinical practice experiences of midwifery students and their perceptions of midwifery preceptors.

Design

A descriptive and cross-sectional study.

Methods

This study was conducted with 205 students enrolled in the midwifery department of the Faculty of Health Sciences of a state university in Turkey. Data collection used a participant information form and the Clinical Learning Environment and Midwifery Preceptor Scales designed to assess factors affecting midwifery students' clinical learning. Data analysis was performed using the SPSS 22.0 program, employing methods such as the Independent Sample T-Test, One-Way Analysis of Variance and Tukey test.

Results

The average total score on the Clinical Learning Environment scale was 31.08 ± 2.16 out of a possible 32, while the average total score on the Midwifery Preceptors scale was 17.60 (SD 1.27) out of a possible 18. The mean total score of the Midwifery Preceptor Scale and the mean scores of the sub-dimensions of Skill Development and Midwifery Practice Philosophy were found to be statistically significantly higher in those aged 21 years and older than aged 20 years and younger ($P < 0.05$). The Midwifery Preceptor Scale total score, the Clinical Learning Environment Scale total score and Skill Development sub-dimensions mean scores of the second-year students were found to be statistically significantly higher than the first and third-year students ($P < 0.05$). Furthermore, students who received education in larger groups and willingly chose and had a passion for the midwifery profession demonstrated significant positive perceptions regarding their clinical learning environment experiences and the impact of their preceptors on their professional growth.

Conclusions

Understanding the perspectives of midwifery students regarding the clinical education environment, preceptors and the teaching and learning process holds great importance for enhancing the quality of the clinical education environment and fostering the development of clinical competencies among midwifery preceptors. (Author)

2023-13334

Translation and validation of the Chinese version of the comprehensive breastfeeding knowledge scale (CBKS). Zhu Q, Abbass-Dick J, Tian C, et al (2024), Midwifery vol 128, January 2024, 103858

Background

The level of breastfeeding knowledge of nursing students may influence their ability to support breastfeeding families. However, to date, it has not been possible to measure this accurately due to the lack of existence of a validated tool in Chinese.

Objectives

To translate the Comprehensive Breastfeeding Knowledge Scale (CBKS) into Chinese, and then evaluate its psychometric properties among Chinese undergraduate nursing students in order to inform and evaluate a nursing breastfeeding education programme.

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Methods

The Brislin translation model was followed, and a three-phase process (translation, back-translation and cultural adaptation) was used to sinicize the CBKS and evaluate its content validity. Construct validity was evaluated with exploratory factor analysis (EFA), and the reliability of internal consistency of the Chinese version of the CBKS was tested by calculating Cronbach's alpha coefficient and the half reliability coefficient.

Settings

Two nursing schools in Beijing and Nanjing, China.

Participants

Four hundred and thirty-nine undergraduate nursing students (257 from Beijing and 182 from Nanjing).

Results

Five experts rated the content validity of the Chinese version of the CBKS as excellent. EFA showed that the Chinese version of the CBKS had three subscales and 23 items. Cronbach's alpha coefficient of the Chinese version of the CBKS and the half reliability coefficient were 0.70 and 0.73, respectively. Students who had completed an obstetrics or paediatric nursing course had significantly higher total scores and mean scores for most items compared with those who had not taken a course. Most of the indicators of EFA met the standards of construct validity, and some were very close to the cut-off.

Conclusion

Overall, the 23-item Chinese version of the CBKS is an acceptable tool to measure the level of breastfeeding knowledge among undergraduate nursing students. This scale can be used to inform the design and evaluation of breastfeeding education materials for nursing students or other health profession students. (Author)

2023-13299

Utilizing Simulation-Based Training to Increase Preeclampsia Recognition in Undiagnosed Patients. Furr S, Martin DR, Schmaldestin K, et al (2023), *The Journal of Perinatal Education* vol 32, no 4, November 2023, pp 213-218

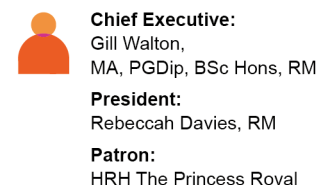
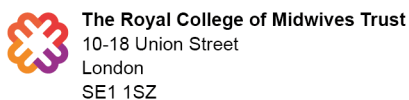
Research suggests that simulation in nursing education is a learning strategy that promotes critical thinking and utilization of clinical judgment in a safe environment without fear of retribution if errors are made. Senior nursing students in a small liberal arts university participated in a complex simulation that involved a pregnant patient with preeclampsia. The students were charged with doing a complete assessment of the patient and unborn baby. Upon completion of the assessment, the students utilized their critical thinking skills to determine the best treatment for the patient and baby that rendered the best outcomes. The goal of the exercise was to provide the students with a realistic scenario that advanced quickly into an emergent situation. The majority of students will not work in labor and delivery, but they will experience situations in their respective units that require quick thinking and critical decision-making. This simulation was a strategy to help facilitate these students into their transition to practice. (Author)

2023-12972

Factors Influencing Postgraduate Student Midwives Clinical Experience. Murphy L (2023), *The Practising Midwife* vol 26, no 10, November 2023, pp 40-44

Postgraduate student midwives are a unique cohort of students with many factors influencing their clinical placement experience. As registered general nurses, they return to being a student to undertake a Higher Diploma in Midwifery programme. A qualitative study was undertaken to identify supports and challenges encountered by postgraduate student midwives during their clinical placement in an Irish maternity hospital. By creating an awareness of the factors which influence postgraduate student midwives clinical experience, an environment can be promoted where students feel valued, supported and work with midwives who are understanding of the students' needs and keen to share their knowledge. (Author)

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2023-12869

Suicidal thoughts and behaviours among student nurses and midwives: A systematic review. Groves S, Lascelles K, Hawton K (2024), *Journal of Advanced Nursing* vol 80, no 6, June 2024, pp 2202-2213

Aim

To synthesize research investigating suicide, suicide attempts, self-harm and suicide ideation in nursing and midwifery students, a group of interest due to high rates of suicide among qualified nurses. Specific areas of interest for this review included prevalence, factors which may contribute to or mitigate risk and suicide prevention interventions.

Design

A systematic review was conducted, and Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA) guidelines were followed.

Data Sources

Three electronic databases were searched, and additional articles identified using hand-searching. Studies were included if they examined suicide, suicide attempts, self-harm or suicide ideation in nursing or midwifery students.

Review Methods

Studies were deduplicated and assessed for inclusion. Data from included studies were extracted, quality of studies assessed and data synthesized, informed by study focus, design and assessed quality.

Results

About 46 studies of largely moderate to low quality were identified. A high-quality study demonstrated increased risk of suicide in Swedish female nursing students, and increased risk of self-harm in nursing students of both sexes. Prevalence of suicide ideation did not appear to differ across course year, or between nursing students and students on other programmes. Psychiatric conditions, particularly depression, were associated with suicide ideation. Three studies related to suicide prevention interventions were identified. Integration of wellness initiatives into the curriculum and peer support were preferred interventions among nursing students and teaching staff.

Conclusions

To understand the extent of suicide and self-harm among nursing and midwifery students there is a need for further epidemiological research stratified by programme of study. To develop prevention interventions and initiatives for nursing students, high-quality longitudinal studies should examine characteristics associated with suicide and self-harm.

Impact

Current findings suggest interventions could include support for students experiencing mental health difficulties, foster peer support, and help develop wellness.

No patient or public contribution. (Author)

Full URL: <https://doi.org/10.1111/jan.15982>

2023-12785

A qualitative study exploring the factors impacting student midwives' experience of developing their breastfeeding support skills. Tant M, Staras T (2023), *MIDIRS Midwifery Digest* vol 33, no 4, December 2023, pp 364-371

Objective

To explore the factors impacting student midwives as they seek to develop their breastfeeding support skills while on a midwifery degree programme in the UK.

Methods

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A qualitative online survey to gather responses from final year student midwives in the UK. Participants were recruited by the dissemination of the survey link via the Lead Midwife for Education (LME) email network. Data collected were analysed using thematic analysis to elicit key themes.

Results and key findings

Sixty four responses were returned. Four key themes were identified: (1) expertise matters; (2) dissonance between the learning settings; (3) a challenging clinical environment; and (4) nothing can replace direct experience.

Participants valued the theoretical underpinning from the university setting but needed greater input around how to deliver breastfeeding support practically and not feel underprepared for this area of practice. Students were positively influenced by time spent with infant feeding specialists. Students were impacted by staff shortages, resulting in their experiencing poor breastfeeding support practices and not getting adequate opportunities to practise their skills under supervision.

Conclusion

Students were keen to talk about their experiences in university and clinical areas. The degree to which they felt supported to develop their skills was variable and it is clear that more can be done to improve the student midwife experience in this area. Recommendations have been made, including more simulation in the university setting, more training for hospital staff to move away from old practices such as 'hands-on' and, finally, for more midwives to be recruited to ensure better conditions for student midwives and maternity staff, and for women and their families.

(Author)

2023-12774

A national conference to showcase and celebrate the maternity support worker role. Parnham C (2023), MIDIRS Midwifery Digest vol 33, no 4, December 2023, pp 319-320

Maternity support workers (MSWs) are an integral part of the maternity workforce, providing high-quality care and support to birthing people, newborn babies, their families and the multidisciplinary team. Birmingham City University has been involved in the development of MSWs nationally for the last seven years and offers two different MSW-specific apprenticeship options: the Level 3 Senior Healthcare Support Worker (Maternity) and the Level 5 Assistant Practitioner (Health) Maternity apprenticeships. (Author)

2023-12751

Supporting autistic midwifery students: fostering inclusion and empowerment. Edwards E (2023), MIDIRS Midwifery Digest vol 33, no 4, December 2023, pp 302-303

In this article Emilie Edwards writes about her experience of being a midwifery student with autism and the actions that need to be taken for a more inclusive learning experience. (AS)

2023-12260

'What do I do?' A study to inform development of an e-resource for maternity healthcare professionals and students caring for people with lived experience of childhood sexual abuse. Montgomery E, Chang YS (2023), Midwifery vol 125, October 2023, 103780

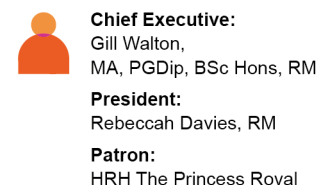
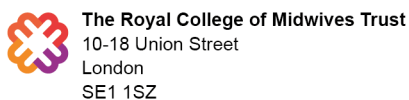
Background

The impact of childhood sexual abuse can last a lifetime. It is more prevalent than many common complexities that require additional care during the childbirth cycle but is rarely part of the education of healthcare professionals and students. This study informed the development of an e-resource to support maternity healthcare professionals and students caring for people with lived experience of childhood sexual abuse.

Objectives

To identify any previous learning of pre-registration students and healthcare professionals in relation to care of survivors of childhood sexual abuse, explore their clinical experience in caring for survivors, identify related learning needs, explore what survivors of childhood sexual abuse would like healthcare professionals to know about their maternity care needs.

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Design

A qualitative descriptive study using focus groups and interviews. Data derived qualitative content analysis was employed to address the objectives.

Setting

The study was designed in consultation with The Survivors Trust and took place in South London, UK

Participants

Thirty seven health care professionals and students participated, comprising 25 students of midwifery, health visiting and medicine; 9 midwives, health visitors and doctors with specialist obstetric training. Eight women with lived experience took part in focus groups.

Findings

Care of women and birthing people who have experienced childhood sexual abuse had not been part of the undergraduate/pre-registration curricula, nor in specialist training for obstetricians. Many practitioners felt unprepared to care for those with lived experience of abuse and their learning needs were wide-ranging. The need for a learning resource was acknowledged and the outline plan that had been produced following the focus groups was endorsed by participants with lived experience.

Conclusion

Care for women and birthing people with lived experience of childhood sexual abuse can be challenging for both personal and professional reasons. This study confirmed the need for a resource that could facilitate the classroom teaching of students and be used for the Continuous Professional Development of qualified practitioners. (Author)

Full URL: <https://doi.org/10.1016/j.midw.2023.103780>

2023-12259

“I believe...” - graduating midwifery students’ midwifery philosophies and intentions for their graduate year: A longitudinal descriptive study. Dawson K, Wallace H, Bayes S (2023), *Midwifery* vol 125, October 2023, 103807

Objective

Midwifery graduates may experience transition shock that makes them question their fit for their workplace and the profession and in extreme cases, may lead to them leaving. Understanding graduate midwives’ worldviews, job intentions and work experiences is important to inform retention strategies. Factors such as having a strong professional identity and experiencing strong job satisfaction are important for midwife retention. Conversely, stress, trauma and work-life imbalances are examples of factors that lead to attrition from midwifery. Transition shock experienced by some graduates can exacerbate these factors if not managed effectively. This study aimed to identify causes and impact of any changes in graduate and early career midwives’ philosophy, practice, and intention to stay in the profession.

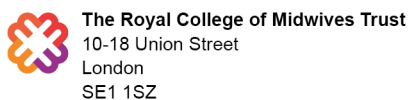
Design, setting and participants

We invited the 2021 and 2022 cohorts of graduating midwifery students from all educational pathways in Victoria, Australia to participate in a longitudinal descriptive study using a questionnaire with both closed and open -ended questions. This paper reports the findings from 16 participants that completed the first survey of a five-year longitudinal descriptive study.

Findings

The sixteen participants predominantly held a woman centred philosophy and ideally wanted to work in a midwife-led model of care. Although excited about moving into practice, they also disclosed a sense of needing to ‘survive’ in a maternity care system that their beliefs were not fully in alignment with.

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Key conclusions

The hopes, expectations and concerns of midwifery students who are anticipating moving into practice in this study resonate with those previously reported and demonstrate the need to consider personality-job fit in supporting this vulnerable group to transition.

Implications for practice

This study provides insights into graduating midwives' hopes for, expectations of, and concerns about transitioning into practice that may inform the design of transition programs and support expansion of midwifery led models of care. (Author)

Full URL: <https://doi.org/10.1016/j.midw.2023.103807>

2023-11901

"Normal in all the rush": A phenomenological study analyzing midwifery students' views on obstetric violence.

Unutkan A, Elem E (2024), Nurse Education Today vol 132, January 2024, 106014

Introduction

In recent years, obstetric violence, which undermines women's dignity and autonomy, has received increased attention worldwide. Considering the importance of midwives in combating violence in the obstetric field and the significance of the discussed issue, the following question arises: How do future midwives view obstetric violence?

Objective

This study aimed to investigate midwifery students' thoughts about obstetric violence.

Design and method

This study was conducted using a phenomenological qualitative research design. This study, which adopted a descriptive approach and used typical case sampling, was conducted in the midwifery department of the Kutahya Health Sciences University. Sixteen midwifery students studying fourth-year in the 2018–2019 academic year, who had participated in childbirth during their studies, and who agreed to participate in the study were included. All students had the experience of repeated monitoring and presence in labor. They had witnessed births in different institutions. Focus group interviews were conducted using an unstructured interview guide to obtain data for the study. Data were collected through four focus group interviews with groups of four students in the classroom environment. The data were evaluated separately by two researchers using the content analysis method in MAXQDA Analytics Pro 2020. The Consolidated Criteria for Reporting Qualitative Studies guidelines were used as a guide in reporting.

Results

As a result of the analysis, four main themes emerged: defining violence, causes of violence, effects of witnessing violence, and whether can violence be prevented?

Conclusions

Midwifery students have an awareness of all visible forms of obstetric violence. However, they were less aware of the invisible structural and policy drivers of obstetric violence. It is invaluable to raise awareness of obstetric violence among midwifery students, who will be the most important defenders of women in childbirth. Studies focused on education and policy will contribute to women receiving quality care at birth. (Author)

2023-11900

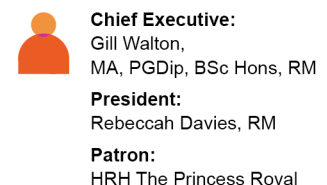
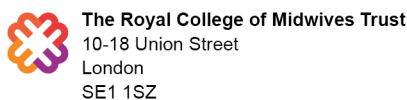
Midwifery professional placement: Undergraduate students' experiences with novice and expert preceptors. Thomas

KJ, Yeganeh L, Vlahovich J, et al (2023), Nurse Education Today vol 131, December 2023, 105976

Background

In recent decades, increased midwifery university places have been offered to address midwifery workforce shortages. As a result, more graduate midwives entered the workforce, in turn leading to more midwifery students

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precepted by novice midwives when on professional placement. It is not known whether this more junior midwifery workforce impacts student experience.

Aims

To explore undergraduate midwifery students' experiences with novice and expert midwifery preceptors, and to identify the benefits and challenges of working with novice and expert preceptors, from the perspective of undergraduate student midwives.

Method

This study used a qualitative descriptive approach. Nineteen third/fourth-year Bachelor of Nursing/Bachelor of Midwifery (Honours) students attended six focus groups (ranging from 2 to 5 participants). Data were analysed thematically.

Results

Three overarching themes were identified: 'Building relationships'; 'Teaching and learning'; and 'Improvements to professional placement'. Benefits and challenges existed with both novice and expert preceptors. Importantly, feeling welcomed and receiving critical feedback were identified.

Conclusion

The student/preceptor relationship is based upon feeling welcomed, and relatability, and is developed more easily with novice preceptors. Expert preceptors provide insightful and valuable feedback and are more able to actively teach. Novice preceptors' consolidation of practice can impact student learning opportunities. Including students in decision-making aids development of critical thinking. Allocation practices which address student learning needs will improve the student professional practice experience.

Midwifery students benefit from working with midwifery preceptors of all experience levels. Translating the findings from this project into preceptorship training programs for midwives will improve student satisfaction and outcomes.

(Author)

Full URL: <https://doi.org/10.1016/j.nedt.2023.105976>

2023-11897

The motivational factors and the perceived effects of attaining higher education among post-diploma graduate nurses and midwives in Kumasi, Ghana: A cross-sectional study. Owusu LB, Poku CA, Kyei-Dompim J, et al (2023), Nurse Education Today vol 130, November 2023, 105936

Background

Globally, there has been increased demand for higher education in nursing and midwifery to support evidence-based practice. It is believed that higher education in nursing leads to improved quality of care. The motivation for pursuing higher education, the choice of institution for learning and the effects of higher education programs have not been given much attention in research literature in Ghana.

Objective

To assess the motivating factors, reasons for the choice of institution and the perceived effects of attaining higher educational qualifications among post-diploma graduate nurses and midwives.

Study design

Descriptive cross-sectional study.

Setting

Kumasi.

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Patron:
HRH The Princess Royal

Participants

Convenience and snowball sampling were used to select 523 nurses and midwives who had pursued higher education after their Diploma in Nursing or Midwifery education.

Method

A researcher-developed questionnaire was used to collect data on motivation, choice of institution and perceived effects of higher education by nurses and midwives. Data were analyzed through descriptive statistics, Pearson correlation and linear regression at 0.05 significance level.

Results

The greatest motivation for higher education by nurses/midwives was to improve clinical judgment. Academic quality and reputation of the institution were the main reasons for the choice of institution (n = 458, 92.7 %). There were weak but positive significant correlations between the perceived effects of higher nursing and midwifery education and pressure from the workplace (r = 0.204, p < .001), and increasing new demands from clients (r = 0.284, p < .001). Increasing demands from clients ($\beta = 0.203$, p < .001) and improving social status ($\beta = 0.264$, p < .001) were the motivating factors that influenced the perceived effects of higher nursing and midwifery education.

Conclusion

The desire for improved professionalism and increased expertise are the reasons nurses and midwives seek higher education. Health managers should support nurses and midwives to attain higher education to improve the quality of care. (Author)

2023-11894

Development and testing of the Midwifery Perceptions and Assessment of Clinical Teaching (MidPaACT) tool. Griffiths

M, Creedy DK, Donnellan-Fernandez R, et al (2023), Nurse Education Today vol 130, November 2023, 105948

Objective

Develop and test a tool to measure midwives' perceptions of their role in preceptoring midwifery students.

Design

A multi method exploratory study design was used.

Population

Preceptor midwives from three maternity units in south-east Queensland Australia.

Methods

A three-phase process was used: item generation; expert review; psychometric testing including content analysis of qualitative responses. The survey was online or paper-based and included demographic details, the Clinical Preceptor Experience Evaluation Tool (CPEET) role subscale and draft tool. A focus group discussion explored the open-ended responses.

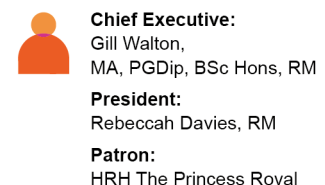
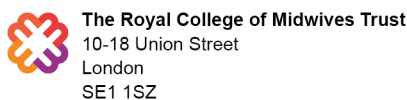
Findings

A large sample of preceptors (n = 164, 64.2 % response rate) participated. Factor analysis revealed a two-factor structure with 24 items accounting for 40.2 % of variance. The mean total score of the Midwifery Perceptions and Assessment of Clinical Teaching (MidPaACT) tool was 103.31 (SD = 9.47). The scale was reliable (Cronbach's alpha 0.89) and valid. Test-retest reliability showed moderate to excellent temporal stability across the scale and subscales. Measures of concurrent validity showed little agreement with the CPEET tool. Qualitative analysis revealed the way midwives were taught as students had a powerful influence on their approach to teaching in practice.

Conclusion

This tool is specifically designed to assess midwifery preceptors' perceptions of their role in student learning in

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practice. Psychometric testing of the MidPaACT tool confirms its reliability and validity.

Implications for practice

Midwifery preceptors are a key influence on the development of students' capability as a midwife. Midwives' perceptions of their proficiency in student learning are under-reported. The MidPaACT tool provides a reliable and valid means of measuring preceptors' perceptions and identifying areas for future educational and workforce improvement. (Author)

Full URL: <https://doi.org/10.1016/j.nedt.2023.105948>

2023-11886

Applying Legitimation Code Theory to teach breastfeeding in nurse education: A case study. Bowdler S, Nielsen W, Meedy S, et al (2023), Nurse Education in Practice vol 72, October 2023, 103780

Aim

To use Legitimation Code Theory as a framework to inform the design of nursing education and gain insights into student perspectives of this design.

Background

Internationally, the World Health Organization's breastfeeding recommendations are not being met. One contributing factor is that healthcare providers including registered nurses lack the knowledge to support breastfeeding women on an ongoing basis and rely on their personal experiences to inform the care they provide. Undergraduate nursing students should receive education to assist breastfeeding women in practice.

Design

The study is underpinned by case-study methodology. The Legitimation Code Theory (LCT) dimension of Semantics and the concepts of semantic gravity and semantic density were used to theoretically frame and develop an intervention module to teach undergraduate nurses about breastfeeding.

Methods

This module was part of an elective seven-week paediatric nursing course. University Human Research Ethics Committee (HREC201/203) reviewed the study. Participants (n = 9) completed semi-structured interviews and thematic analysis helped us to understand their experiences of the module. The Template for Intervention and Description and Replication (TIDeR) framework was used to report the intervention.

Results

The breastfeeding module was positively received by participants who noted the module's structure differed from previous courses. Three main themes were identified in the student experience. These are: a) threads and links; b) engaging structure; and c) seedlings.

Conclusion

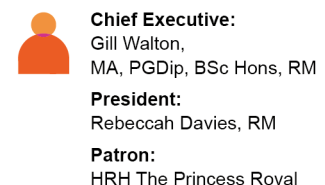
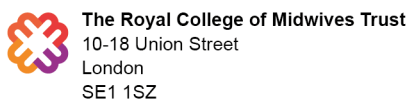
Legitimation Code Theory is an effective course development framework to harness the learners' prior informal knowledge and weave learning activities between theory and contextual practice to develop cumulative knowledge.

Impact

With an increased understanding of how undergraduate nursing students develop knowledge, the LCT dimension of Semantics can be used to structure content knowledge in instructional design. This approach builds explicit bridges between knowledge development in the nursing curriculum and learners' informal knowledge and contextual practice in clinical settings. (Author)

Full URL: <https://doi.org/10.1016/j.nepr.2023.103780>

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2023-11885

Advocacy, accountability and autonomy; the learning intention of the midwifery student continuity of care

experience. Tierney O, Vasilevski V, Kinsman L, et al (2023), Nurse Education in Practice vol 72, October 2023, 103772

Problem

The Continuity of Care Experience is a mandated inclusion in midwifery education programs leading to registration as a midwife in Australia. The practice-based learning experience has evolved over time, yet there remains no standardised learning intentions, objectives, or outcomes for the model.

Aim

To identify the key learning intentions of the Continuity of Care Experience by an expert panel to support the development of learning outcomes.

Methods

A descriptive qualitative study with two focus groups were conducted with an expert panel (n = 15). Participants were midwifery education subject matter experts on the Continuity of Care Experience with backgrounds in academia, policy development, curriculum design, accreditation, or clinical education. The discussions were transcribed and thematically analysed.

Findings

Three main themes and six sub-themes describe the learning intentions of the Continuity of Care Experience. The main themes were: (1) advocacy for women; (2) accountability of care; and (3) autonomy in practice.

Discussion

The education model of continuity of care enables students to develop midwifery practice that involves advocating for women, being accountable for their care and being autonomous in practice. We have established that during the experience students practice in partnership with women and are exposed to the full scope of midwifery care. Importantly students learn holistic woman-centred practice.

Conclusion

The learning intentions of the Continuity of Care Experience reflects woman-centred practice. Having identified a common understanding of the learning intention, these can now be used to design learning, and assessment, through the development of measurable learning outcomes. (Author)

Full URL: <https://doi.org/10.1016/j.nepr.2023.103772>

2023-11884

Breastfeeding knowledge & attitudes: Comparison among post-licensure undergraduate and graduate nursing

students. Khasawneh WF, Moughrabi S, Mahmoud S, et al (2023), Nurse Education in Practice vol 72, October 2023, 103758

Research aims

The aims of this study are to compare the knowledge and attitude scores between undergraduate and graduate nursing students and to identify the variables associated with higher breastfeeding knowledge and attitudes.

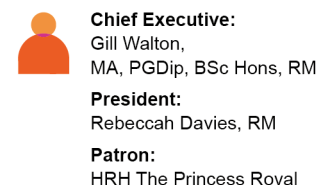
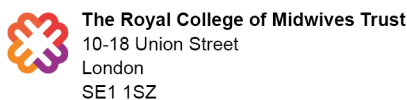
Background

Nurses' knowledge and attitudes towards breastfeeding greatly impact their roles in promoting and supporting breastfeeding. However, they may not have sufficient knowledge and/or positive attitudes to support and advocate for these families. Many studies focused on professional nurses or undergraduate students' knowledge, attitudes, and beliefs. Few studies included registered nurses enrolled in post licensure undergraduate and graduate nursing programs.

Design

A cross-sectional, prospective, and descriptive study.

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Methods

A convenient sample of 95 nursing students (50 undergraduate and 45 graduate) was recruited from an ethnically diverse, urban university in Southern California. Students voluntarily completed an online survey adapted from Brodribb, et al. (2008). Bivariate analysis was conducted to identify relationships between study variables.

Results

Compared to undergraduates, graduate students scored higher on knowledge and attitudes towards breastfeeding ($p < 0.001$). Students' perception of their prior academic breastfeeding preparation was not related to their current knowledge and attitudes. Age, having children, exclusively breastfed own baby, and duration of personal breastfeeding were positively associated with attitudes and knowledge ($p < 0.05$ for all variables). Years of nursing experience ($p = .01$) was positively associated with attitudes only.

Conclusions

Compared to academic preparation, age, having children, and personal breastfeeding experiences seem to be better indicators of breastfeeding knowledge and attitudes. Nursing programs should exert more effort in enhancing curricular evidence based breastfeeding education. More research is needed to support these efforts. (Author)

Full URL: <https://doi.org/10.1016/j.nepr.2023.103758>

2023-11882

Examining arts-based practice in midwifery education: An integrative review. Sanders RA, Naughton F, Hardy S, et al (2023), Nurse Education in Practice vol 72, October 2023, 103745

Aims

The aim of this integrative review is to synthesise the literature on creative teaching methods in midwifery education. The review question seeks to investigate the experiences of student midwives and midwifery educators of using creative methods as a learning approach.

Background

The benefits of creative teaching methods are widely acknowledged but the ways in which this may impact midwifery students' learning processes, or how this relates to their developing professional development, is not well understood. Research focused specifically on student midwives is yet to be synthesised.

Design

An integrative review was undertaken using data comparison with reflexive thematic analysis to identify common themes.

Methods

Eight electronic databases were searched with key terms in June 2022. English language studies from qualitative, quantitative, mixed-methods and wider literature were included.

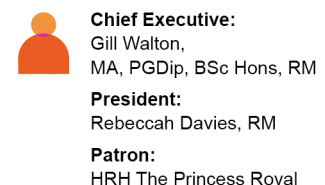
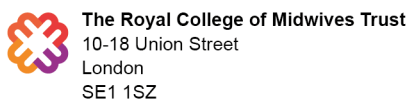
Results

Twenty-two texts were included in the synthesis. Four themes were generated from the data; 1) What is the offering - More than a lecture; exploring the educator and student exchange and environment for learning; 2) Working in parallel - examining the change in teaching dynamic and collaborative partnerships; 3) Journeying towards holism - focused on student's integration of learning processes; and 4) Stepping into the professional - engaging with how using creativity can aid students' growing sense of themselves as professionals. This highlights improvements in levels of confidence, professional development and emotional intelligence in midwifery students.

Conclusion

Creative teaching and learning methods enable student midwives to make meaningful connections between

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2023-11877

Effectiveness of an optional breastfeeding course for multidisciplinary undergraduate healthcare students: A quasi-experimental study. Yu M, Xu M, Liu X, et al (2023), Nurse Education in Practice vol 69, May 2023, 103609

Aims

This study aimed to examine and quantify the effectiveness of an optional breastfeeding course for multidisciplinary undergraduate healthcare students and to provide advice for education improvement based on students' characteristics and learning feedback.

Background

Breastfeeding has received global awareness and educating undergraduate healthcare students is a prospective way to promote breastfeeding. This is the first report from mainland China to verify the education effects and formulate a proposal for improvement.

Design

A quasi-experimental study with a one-group pretest-posttest design.

Methods

An optional breastfeeding course covering eight topics based on the Health Belief Model was conducted for multidisciplinary students in a medical college. The Breastfeeding Knowledge Questionnaire, Iowa Infant Feeding Attitude Scale and Breastfeeding Promotion Intention Scale were completed for pre- and post-education comparison. The Wilcoxon signed-rank test, Mann-Whitney U test, Kruskal-Wallis test and chi-square test were used for statistical analysis. The class average normalized gain and individual students' normalized gain were calculated to quantify the effectiveness from the perspective of learning gain.

Results

From March to November 2021, 102 students specialized mainly in nursing, clinical medicine, medical imaging technology and midwifery took the course. Knowledge, attitudes and intention scores improved significantly ($Z = 8.70, 8.72, 7.64$, respectively, $p < .001$) and the class average normalized gains were 81.0%, 52.3% and 70.6%, respectively. Insignificant differences were found for students of different genders and categories of specialties ($p > .05$). Students of first year had significantly higher individual normalized gains ($p < .05$). In learning feedback, the top-ranked advice for course improvement was to increase practice and experience (75.5%).

Conclusions

This optional breastfeeding course produced medium to high learning gains for multidisciplinary healthcare undergraduates. Independent breastfeeding education based on behavioral theory for multidisciplinary students is recommended to be conducted in medical colleges. The addition of practice and experience may add value to such education. (Author)

2023-11876

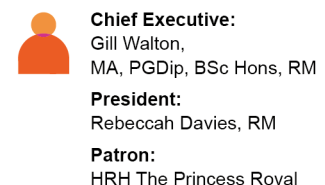
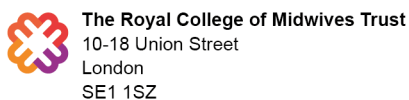
Life-limiting fetal conditions: Are Australian student midwives prepared? A mixed-methods survey. Browning N (2023), Nurse Education in Practice vol 68, March 2023, 103569

Aim

To document current teaching methods, curriculum, and perceived educational preparation related to the teaching of life-limiting fetal conditions, termination, and perinatal palliative care to Australian student midwives.

Background

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Australian women receiving a diagnosis of a life-limiting fetal condition are generally offered a choice between termination of pregnancy and perinatal palliative care. Midwives are often involved with caring for these women. What Australian student midwives are being taught about life-limiting fetal conditions, termination of pregnancy, and perinatal palliative care during their entry-to-practice program is unknown.

Design

This study utilised a mixed-methods descriptive approach for data collection and analysis.

Methods

Academic Leads of all Australian entry-to-practice midwifery programs received a questionnaire exploring topics taught, teaching time, teacher role, and perceived effectiveness of student preparation. Data was analysed statistically and thematically.

Results

Twelve of 24 Academic Leads responded (50%); only five stated their programs taught all three areas. More respondents taught about termination of pregnancy (10/12) than perinatal palliative care (7/12). On average 5.8 (± 2.8) total hours was spent teaching about life-limiting fetal conditions, termination of pregnancy, and perinatal palliative care during the entire midwifery program, with a range of 1 – 10 h. The free-text data identified three central themes: lack of value within the curriculum; disconnect between the university and the placement hospital; and preparation for practice. Most (10/12) Academic Leads did not believe student midwives are prepared to care for affected families.

Conclusions

Entry-to-practice midwifery programs vary considerably in their education surrounding life-limiting fetal conditions, however teaching hours overall were low and most Academic leads did not feel (or know if) their students were adequately prepared. Further research is required to determine if early career midwives find their university education in life-limiting fetal conditions adequate preparation for practice, and to then remediate identified deficiencies. (Author)

Full URL: <https://doi.org/10.1016/j.nepr.2023.103569>

2023-11419

Developing new support pathways for students. May L, Rooney J (2023), World of Irish Nursing & Midwifery vol 31, no 7, October 2023, pp 20-21

Louise May and Jean Rooney discuss how new booklets summarising key information are proving invaluable to midwifery students at the Rotunda. (Author)

Full URL: <https://publications.inmo.ie/view/684785643/36/>

2023-11418

The next generation. Hughes F (2023), World of Irish Nursing & Midwifery vol 31, no 7, October 2023, pp 20-21

Freda Hughes asked two student members to share their experience and advice with those just starting out. (Author)

Full URL: <https://publications.inmo.ie/view/684785643/20/>

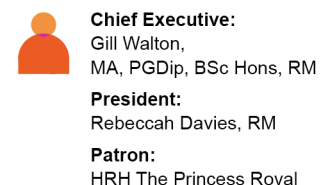
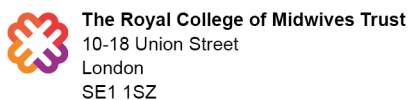
2023-11158

'Only for the white'. A qualitative exploration of the lived experiences of Black, Asian and Minority Ethnic midwifery students. Okiki C, Giusmin G, Hunter L (2023), Nurse Education Today vol 131, December 2023, 105982

Background

An ethnically diverse workforce has been identified as a key component of safe, compassionate maternity care, and yet midwifery remains a predominantly White profession across the Global North. Understanding the experiences of Black, Asian and Minority Ethnic midwifery students is key to addressing this disparity.

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Objective

To capture the university and placement experiences of Black, Asian and Minority Ethnic midwifery students in a culturally White environment.

Methods

A qualitative approach underpinned by a feminist, inductive, interpretivist paradigm informed a study undertaken with student midwives studying at three separate universities in South East England. Five virtual focus groups and two semi-structured interviews were conducted with thirteen current student midwives and one preceptee (recently graduated) midwife self-identifying as Black, Asian or Minority Ethnic. Analysis was inductive, data-driven and thematic. Standards for Reporting Qualitative Research recommendations have been used to formulate this report.

Findings

Although some participants reported positive experiences and felt well-supported, an overarching narrative emerged of midwifery as an exclusive and White profession. Institutionalised Whiteness was experienced in university, in placement and within individual student cohorts. Four themes were identified: 'being an outsider', 'prejudice, discrimination and racism', 'nowhere to turn' and 'positive forces'.

Conclusions

Racist and discriminatory beliefs and practices in some midwifery education and placement settings negatively impact student experience and are likely to result in poorer care being provided to Global Ethnic Majority women and families. An unwillingness among some White educators and students to recognise the presence and impact of inequitable and racist environments, and a lack of clear, acceptable, and effective pathways for students to use to raise and discuss concerns, makes it difficult to challenge and change this injustice. (Author)

Full URL: <https://doi.org/10.1016/j.nedt.2023.105982>

2023-10750

Waste not, want not: Strategies to improve the supply of clinical staff to the NHS. Palmer W, Rolewicz L, Dodsworth E (2023), London: Nuffield Trust September 2023.17 pages

For every five nurse training places, only three full-time nurses join the NHS. The rate of dropouts in the staffing pipeline from student to early-career clinician is worryingly high, with significant numbers opting out before or soon after joining the NHS, contributing to an understaffed health service under ever-greater strain. This analysis sets out the scale of NHS attrition and puts forward a 10-point plan to improve retention, including a policy proposal to gradually write off clinicians' student debt over 10 years.

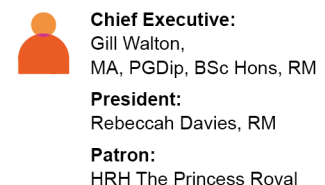
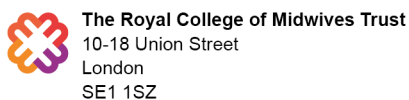
For too long, the domestic training pipeline for clinical careers has been unfit for purpose. This is a major problem for students, graduates, the NHS and the government.

Our research highlights leaks across the training pathway, from students dropping out of university, to graduates pursuing careers outside the profession they trained in, and outside public services. This, alongside high numbers of doctors, nurses and other clinicians leaving the NHS early in their careers, is contributing to publicly funded health and social care services being understaffed and under strain. It also fails to deliver value for money for the huge taxpayer investment in education and training.

Bold policymaking is needed. This report sets out a 10-point plan for improving the attrition during training and early NHS careers, including consideration of a student loans forgiveness scheme - a suggestion we set out in further detail in an accompanying policy proposal jointly authored by colleagues at London Economics and Edge Hill University. We illustrate how such a scheme would gradually write off outstanding student debt, clearing it after 10 years of eligible employment, with the aim of increasing applications to study, reducing attrition during training and improving participation and retention in public services on qualifying.

The estimated cost would be somewhere in the region of £230 million for nurses, midwives and allied health

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professionals per cohort in England. A similar scheme, or early-career loan repayment holidays for doctors and dentists in eligible NHS roles, should also be seriously considered. We believe this would represent a very sound investment. (Author)

Full URL: <https://www.nuffieldtrust.org.uk/research/waste-not-want-not-strategies-to-improve-the-supply-of-clinical-staff-to-the-nhs>

2023-10576

Midwifery students' experiences of support for ethical competence. Honkavuo L (2022), Nursing Ethics vol 29, no 1, February 2022, pp 145-156

Background:

Midwifery students are confronted with several ethical dilemmas and challenging situations during clinical midwifery care practice. Since ethical competence of midwifery students is under development, it is important to support the students' learning progress of ethical issues from diverse viewpoints.

Objective:

From the perspective of didactics of caring science and the context of midwifery students, to explore how midwifery students' experience supports for ethical competence in midwifery education and investigate how ethically challenging situations have been carried out during clinical midwifery care practice.

Design:

Qualitative, explorative and descriptive design with inductive nature.

Methods:

Focus group interviews with nine Swedish midwifery students. Hans-Georg Gadamer's philosophical hermeneutics was applied to guide the interpretation.

Ethical considerations:

Ethical principles and scientific guidelines were followed. Informed consent was obtained from the participants.

Confidentiality was respected and quotations anonymised.

Results:

Receiving support when ethically challenging situations occur in clinical midwifery practice is important and necessary. One main theme, such as support is a human and caring factor in the midwifery students' Bildung process on ethical competence, and four subthemes, such as supporting through trust and responsibility; supporting through dignity and respect; supporting through truthfulness and justice; and supporting through dialogue and reflection, were created from the hermeneutical interpretation.

Discussion:

Teaching ethics should be carefully planned, consistent and continue throughout the midwifery education. There is dispersion in the pedagogy of ethical situations, the methods and perceptions associated with it, and in obtaining possible support for students. Developing well-experienced methods could benefit the support of midwifery students' ethical competence when they experience ethically challenging situations in midwifery care practice.

(Author)

Full URL: <https://doi.org/10.1177/0969733021999773>

2023-10555

Neurodivergent students and NHS staff being 'driven out of the workforce'. Anon (2022), 19 December 2022

Autistic midwifery researchers including a Middlesex University lecturer and graduate have spoken of the challenges they have faced at university and in the workplace. (Author)

Full URL: <https://www.mdx.ac.uk/news/2022/12/NHS-nurses-autism-midwifery-students->

2023-10554

'A square peg in a round hole': Navigating maternity as an autistic student midwife and beyond. Conley-Reid H (2022), Maternity & Midwifery Forum November 2022

Students and midwives alike come from a variety of backgrounds and experiences. In this article Holly Conley-Reid, a newly qualified midwife, shares her personal experience of having autism as a student and provides advice for

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educators and midwives. (Author)

Full URL: <https://www.maternityandmidwifery.co.uk/a-square-peg-in-a-round-hole-navigating-maternity-as-an-autistic-student-midwife-and-beyond/#:~:text=Having%20autism%20does%20not%20mean,from%20being%20a%20brilliant%20one.>

2023-10331

Learning 'With Woman' Alongside a Privately Practising Midwife. Eckhardt EH (2023), *The Practising Midwife Australia* vol 1, no 3, January 2023, pp 32-34

A midwifery degree consists of an even mix between theoretical load and student placement in an appropriate facility. I spent two years with a private practising midwife, completing my entire antenatal and postnatal placement hours with her, as well as most of my continuity of care experiences. In this article, I am taking you on my journey through long-term student placement with a private practising midwife. (Author)

2023-10293

Cultural Immersion: More Than Maternity Care. Toli B (2022), *The Practising Midwife Australia* vol 1, no 1, September 2022, pp 32-34

Waminda, located on the South Coast in New South Wales, provides a holistic and culturally-safe service for Indigenous women and their families. Maternity care at Waminda is known as Minga Gudjaga, and through this service, Elders and Aunties enact thousands of years of Indigenous knowledge to ensure the cultural safety and health of Minga (mothers) and Gudjaga (babies). A clinical placement at Waminda for one Indigenous midwifery student proved pivotal to her growth and vision as a midwife and an Aboriginal woman. (Author)

2023-10263

NMC Series 1. Support from the NMC. Williams J, Wallace V (2023), *The Student Midwife* vol 6, no 3, July 2023, p 29

The Nursing and Midwifery Council (NMC) regulates midwives – but are also there for student midwives during their midwifery programmes. This new series of four articles will explore the role of the NMC in supporting students and their practice. (AS)

2023-10158

Providing care during a breech birth. Robinson E (2023), *British Journal of Midwifery* vol 31, no 9, September 2023, pp 530–533

A student midwife, Eowyn Robinson, provides a critical reflection of an experience providing care during a breech birth, exploring the situation using the holistic reflection model. (Author)

2023-09998

State of midwifery education 2023. Royal College of Midwives (2023), 13 September 2023

Midwifery education is vital to ensure we have a midwifery workforce for the future. Investment in midwifery educators, students, resources and partnership working between universities and the NHS is essential for the NHS workforce and the profession. (Author)

Full URL: <https://www.rcm.org.uk/media/7001/rcm-state-of-midwifery-education-2023.pdf>

2023-09878

Immersive Videos Improve Student Self-Efficacy in Clinical Lactation. Singletary N, Sanchez R, Spencer D, et al (2023), *The Journal of Perinatal Education* vol 32, no 3, Autumn 2023

The current study examined the use of immersive technology as a way to improve access to high-quality interpersonal breastfeeding interactions in an undergraduate clinical lactation course. In particular, we investigated the impact of immersive consultation videos and related activities on student self-efficacy, motivational beliefs, and perceived skill level. Results indicate that usability was high, with participants rating videos, interactives, and activities positively. Students did report a significant increase in self-efficacy and their perceived ability to meet the course learning

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objectives; no significant changes in the level of interest or perceived skill were found. Our results demonstrate that high-quality immersive videos can be an important learning tool for teaching clinical skills when access to direct patient care is limited or absent. (Author)

2023-09540

Trauma-Informed Pedagogy: Instructional Strategies to Support Student Success. Arbour M, Walker K, Houston J (2024), Journal of Midwifery & Women's Health vol 69, no 1, January/February 2024, pp 25-32

Over the past several years, the ongoing coronavirus disease 2019 pandemic has contributed to challenging working and life conditions. As a result, the midwifery and health care workforce has faced significant shortages due to burnout. Increased societal awareness of historical trauma and systemic racism embedded within US culture has also led to increased anxiety and signs of trauma among midwifery and health profession students. Now more than ever, innovative teaching strategies are needed to support students, reduce the risks of burnout, and increase diversity in the workforce. One strategy is to adopt a trauma-informed pedagogy within midwifery education. Trauma-informed pedagogy is founded on core assumptions of trauma-informed care and thus supports student success by recognizing that the student cannot be separated from their own life experiences. Faculty and preceptors can develop empathetic, flexible supports that communicate care and concern regarding students' personal and social situations, and emotions. Empathetic behavior from teachers also increases student learning motivation, making it easier for students to actively engage in learning thereby reducing their distress. The purpose of this State of the Science review, therefore, was to describe the literature surrounding trauma-informed pedagogy and to offer concrete educational strategies that faculty members and educational programs can employ to increase the success of a diverse student body. This can be accomplished through flexibility in curriculum design and outcome measurement to ensure attainment of end of program learning outcomes. Institutional and administrative support are essential to develop a faculty who realize the benefit and value of trauma-informed pedagogy underpinning student success. (Author)

2023-09526

Couple thank student midwife who gave birth to their daughter. Anon (2023), BBC News 31 August 2023

Reports that a couple have expressed their thanks to a student midwife who acted as their surrogate, after they had lost their baby son who was born 15 weeks early. States that Ami Geddes had been told she may not survive another pregnancy, having been diagnosed with type 1 diabetes as a child, and having given birth to her first son, now four years old, prematurely. After hearing about their situation, Jennifer Halliday offered to carry a child for them and gave birth to the couple's baby daughter in August. (JSM)

Full URL: https://www.bbc.co.uk/news/uk-scotland-glasgow-west-66659235?at_medium=RSS&at_campaign=KARANGA

2023-09457

'It takes a village': a qualitative study exploring midwives' and student midwives' experience of the new Standards for Student Supervision and Assessment in practice. McKelvin G, Shackleton D, Clarke J, et al (2023), MIDIRS Midwifery Digest vol 33, no 3, September 2023, pp 217-226

Objective

To explore students' and midwives' preparation for and experiences of supervision and assessment in practice, using the new SSSA.

Design

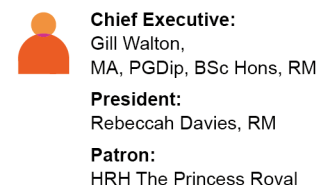
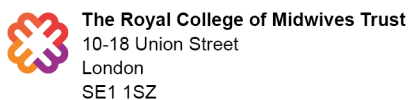
An exploratory qualitative study was undertaken. Student midwives (SMs) and registered midwives (RMs) were invited to participate using online recruitment strategies across closed groups. Participants were required to complete either an open-ended questionnaire or take part in an in-depth interview. The demographics and background data were presented in a descriptive format and qualitative data were analysed thematically.

Setting and participants

Twenty-two SMs and 13 RMs from across the United Kingdom who had experience using the new SSSA were recruited for this study.

Findings

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The thematic analysis identified three key themes: 'Thrown in the deep end', where a lack of preparation, training, time, resources and communication were identified. 'A double-edged sword', in which staff and students identified the benefits of working with different professionals, while acknowledging the significant challenges they faced without the student–midwife relationship and lack of supervisor continuity. 'A daily struggle' was expressed because of burnout, which many students faced. Overall, one overarching theme that threaded itself through the narrative was that 'it takes a village' to create competent and confident midwives.

Key conclusions and implications for practice

This study highlights some of the benefits students and midwives experience using the new standards but they are marred with significant challenges that need to be addressed to protect the future workforce and the public. There needs to be a more collaborative effort to ensure that midwives have the right resources, training and protected time to fulfil their roles as supervisors and assessors. The student journey across placement needs to be mapped out carefully to ensure that an element of continuity that builds a student–midwife relationship is maintained. This will alleviate the impact on student learning, confidence and burnout. (Author)

2023-09413

Exploring the internship experiences of Swedish final term student midwives: A cross-sectional survey. Zwedberg S, Barimani M, Jonas W (2020), Sexual & Reproductive Healthcare vol 26, December 2020, 100543

Today, student midwives in Sweden spend half of their midwifery education at various internships. Practice reality demonstrates that there is an insufficient number of preceptors for the students, and the workload is demanding. Therefore, the present study aimed to explore the experiences of final term Swedish students during their midwifery internship and whether other paedagogical learning experiences beyond the apprenticeship model were included.

A cross-sectional survey was distributed to 288 final year midwifery students at all universities offering the midwifery programme in Sweden. This paper focuses on open-ended questions, which were answered by 108 students, and analysed inductively via thematic analysis.

Students described an intensive period with pressure during their internship. They expressed a desire for fewer parallel tasks and a better-structured internship. Students revealed that it was both a challenge and stressful to be under constant high performance while practising clinically. Furthermore, students described feelings of competition towards fellow peers in regard to attaining the final number of 50 assisted births. As to the paedagogical methods, the classical preceptorship model with a one-to-one student-preceptor relationship was predominately used. Preceptors were perceived as crucial role models. However, this learning experience was considered suboptimal for learning in the event where preceptors were not engaged or felt insecure regarding their knowledge, or if the preceptor was changed. For the students, the most optimal setting would be if preceptors were selected, trained, and supported in their role to supervise students, instead of being assigned any available preceptor, who was, at times, not a midwife. (Author)

2023-09407

Developing confidence during midwifery training: The experience of Swedish final year students. Bäck L, Karlström A (2020), Sexual & Reproductive Healthcare vol 25, October 2020, 100535

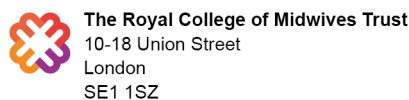
Objectives

Confidence is essential in performing midwifery care since the profession places great demands on the ability to work independently with a scientific approach and professional responsibility. Clinical training is extensive during midwifery education and is essential for the development of midwifery student's confidence and competence. The aim of the study was to describe the factors that increased and decreased confidence for midwifery students in clinical practice.

Study design

A qualitative design was used. Data was collected by a questionnaire that measured Swedish students' self-reported

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assessment of selected midwifery competencies. Two open questions gave the students the possibility to comment on what affected confidence during clinical practice. There were 401 comments analyzed by manifest content analysis.

Results

Five categories described the experience of the students. Supervision during clinical training and the relationship with the midwives were most important factors for developing confidence. Further, to be theoretically and practically prepared before entering clinical practice. Regardless of activity the environment has to be learning and give time for reflection. Personal factors could affect professional confidence but above all it takes time to learn and practice midwifery. Factors that decreased confidence were stressed and uninterested supervisors. Patronizing attitudes towards students and the fear of doing something wrong also decreased confidence.

Conclusions

Several factors contribute to enhance confidence among midwifery students in clinical training. The most important factor was supervision and the role as supervisor must be emphasized and sufficient time must be allocated to supervising midwives for them to fulfil their commitment. (Author)

2023-09133

Midwifery students' reactions to ethical dilemmas encountered in outpatient clinics. Ejder Apay S, Gürol A, Gür EY, et al (2020), Nursing Ethics vol 27, no 7, November 2020, pp 1542-1555

Background: Midwives are required to make ethical decisions with the support of respective codes of professional ethics which provide a framework for decision making in clinical practice. While each midwife should be ethically aware and sensitive to the ever-changing issues within reproduction, few empirical studies have examined the views of student midwives in relation to reproductive ethical dilemmas.

Objective: The aim of this study was to explore midwifery students' reactions to a number of ethical dilemmas relating to women's experiences of reproductive decision making.

Design: A series of focus groups were conducted with midwifery students who were asked to discuss five culturally significant scenarios including issues of knowledge acquisition regarding methods of family planning, removal or insertion of an intrauterine device, and abortion.

Setting: A University in Turkey was the setting for this study.

Participants: Purposeful sampling was adopted which resulted in five focus groups with a total of 57 midwifery students.

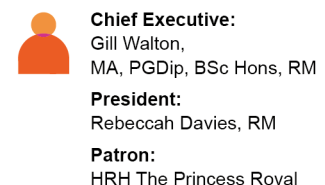
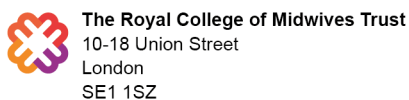
Ethical considerations: The study was reviewed and granted formal ethical approval by an ethical committee at the Faculty of Health Science in Atatürk University. The head of the Faculty of Health Science approved the investigation. The participants received both oral and written information about the study and they gave their consent.

Results: Five themes were identified from the analysis of the focus group data related to all five scenarios. These themes were 'the right to information', 'choice and protection', 'parental rights and welfare of the women', 'make a decision' and 'women rights and sexual abuse'.

Conclusion: This study has shown that while students respected women's choice, they also expressed great ambivalence in some situations when personal values conflict with dominant societal beliefs and professional ethics. A focus on ethics education to include human rights is suggested as a means to enable students to explore their own social-value judgements, and as a means to limit the possible development of ethical confusion and moral distress.

Keywords: Ethical dilemma; midwifery; reproduction; students. (Author)

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2023-09094

Making our voices heard. O'Connell R (2023), World of Irish Nursing & Midwifery vol 31, no 5, Summer 2023, p 61

Roisin O'Connell shares the perspective of student nurses and midwives who attended the INMO ADC in Killarney.

(Author)

Full URL: <https://publications.inmo.ie/view/757579364/60/>

2023-09093

Youth forums call for review of preceptorship standards. Ryan M (2023), World of Irish Nursing & Midwifery vol 31, no 5,

Summer 2023, p 33

THE plan to increase student placement numbers in the NMBI Statement of Strategy for 2023-2025 has necessitated the "urgent review" of current preceptorship requirements for nursing and midwifery students, according to Rebecca

Brennan. (Author, edited)

Full URL: <https://publications.inmo.ie/view/757579364/32/>

2023-09072

Intervention with a smoking patient. Anon (2023), World of Irish Nursing & Midwifery vol 31, no 4, May 2023, p 39

The latest RCM i-Learn module we are highlighting brief advice and intervention that can be made with pregnant clients who smoke. (Author)

Full URL: <https://publications.inmo.ie/view/904540299/38/>

2023-09065

A practical guide to neonatal jaundice. Anon (2023), World of Irish Nursing & Midwifery vol 31, no 3, April 2023, p 37

The latest RCM i-Learn module we are highlighting provides midwives with a guide to recognise and manage newborn jaundice. (Author)

Full URL: <https://publications.inmo.ie/view/529639626/36/>

2023-09060

Musings of a second year student midwife. Magdalene A (2023), Midwifery Matters no 177, Summer 2023, p 19

The author discusses the often overwhelming pressure and stress of studying midwifery. (MB)

2023-09054

Bereavement care – getting it right. Anon (2023), World of Irish Nursing & Midwifery vol 31, no 2, March 2023, p 27

When you have one chance to get it right when working with bereaved parents, it is important to be well prepared.

(Author)

Full URL: <https://publications.inmo.ie/view/925117217/26/>

2023-09050

Sharing our experiences. O'Connell R (2023), World of Irish Nursing & Midwifery vol 31, no 2, March 2023, p 25

Róisín O'Connell reports on the recent visit of Norwegian students and new graduates. (Author)

Full URL: <https://publications.inmo.ie/view/925117217/24/>

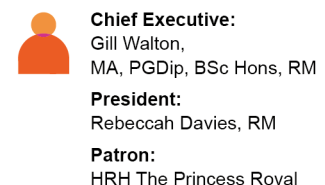
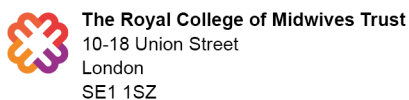
2023-08550

Joining forces. Buckleygray M (2023), Midwives vol 26, July 2023, p 64

Marie Buckleygray is a third-year midwifery student at Robert Gordon University. As the chair of the newly formed

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2023-08520

Voice of a...midwifery apprenticeship graduate. Saville G (2023), *Midwives* vol 26, July 2023, p 35

Georgie Saville is one of the first cohort to complete the new midwifery apprenticeship. Here she describes her career progression from working as a maternity support worker to becoming a newly qualified midwife. (Author, edited)

2023-08423

Understanding Facilitators and Barriers to Providing Equity-Oriented Care in the NICU. Joseph RA (2023), *Neonatal Network* vol 42, no 4, July/August 2023, pp 202-209

The current study examined the use of immersive technology as a way to improve access to high-quality interpersonal breastfeeding interactions in an undergraduate clinical lactation course. In particular, we investigated the impact of immersive consultation videos and related activities on student self-efficacy, motivational beliefs, and perceived skill level. Results indicate that usability was high, with participants rating videos, interactives, and activities positively. Although no significant improvements in their level of interest or perceived skill were found, students did report a significant increase in self-efficacy and their perceived ability to meet the course learning objectives. Our results demonstrate that high-quality immersive videos can be an important learning tool for teaching clinical skills when access to direct patient care is limited or absent. (Author)

2023-08345

An Educational Intervention to Explore and Overcome Nursing Students' Breastfeeding Barriers: A mixed-Methods Quasi-experimental Study. Ramírez-Durán MdV, Gutiérrez-Alonso C, Moreno-Casillas L, et al (2024), *The Journal of Perinatal and Neonatal Nursing* vol 38, no 1, January/March 2024, pp E3-E13

Background:

Nursing and midwifery students do not feel adequately prepared during their clinical training to support women who breastfeed, demanding more effective communication skills and knowledge.

Aim:

The aim was to evaluate changes in students' breastfeeding knowledge.

Methods:

This was a mixed-methods quasi-experimental design. Forty students voluntarily participated. Using a 1:1 ratio, 2 groups were randomly created and completed the validated questionnaire ECoLaE (pre-post). The educational program consisted of focus groups, a clinical simulation, and a visit to the local breastfeeding association.

Findings:

The control group's posttest scores ranged from 6 to 20 (mean = 13.1, standard deviation [SD] = 3.0). The intervention group ranged from 12 to 20 (mean = 17.3, SD = 2.3). A Student's t test for independence samples was calculated ($P < .005$, $t = 4.5$, median = 4.2). The intervention group had a mean difference of 10 points in improvement (mean = 10.53, SD = 2.20, min = 7, max = 14), whereas the control group had a mean of 6 points (mean = 6.80, SD = 3.03, min = 3, max = 13). The multiple linear regression explained the intervention's effect. The regression model had statistical significance ($F = 4.87$, $P = 0.004$), with an adjusted $R^2 = 0.31$. The linear regression between the posttest scores and group variables after adjusting by age showed an increment of 4.1 points in the intervention posttest scores ($P < .005$, 95% confidence interval [CI] = 2.1-6.1).

Conclusions:

The educational program "Engage in breaking the barriers to breastfeeding" improved nursing students' knowledge.

(Author)

Full URL: <https://doi.org/10.1097/JPN.0000000000000742>

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2023-07580

England State of maternity services 2023. Royal College of Midwives (2023), July 2023. 11 pages

The Royal College of Midwives' annual State of Maternity Services report provides an overview of some of the trends in the midwifery workforce in England, and identifies some of the challenges faced by the profession and by maternity services. The report draws on the latest statistics available to provide information on birth rates, the age profile of mothers, numbers of current and student midwives and other observations such as the challenges faced by the profession with regard to staff shortages, staff burnout and the impact of retirement. The Government's 2018 commitment to open up more places on midwifery courses is underway. Courses numbers have increased, from 2,380 in the 2015/16 academic year, to 3,720 in 2021/22.

The RCM supports the development of midwifery apprenticeships as a new route into the profession. This was included on the recent NHS Long Term Workforce Plan and is a positive step towards increasing the workforce. (EA)

Full URL: <https://www.rcm.org.uk/media/6915/england-soms-2023.pdf>

2023-07520

The perpetual student. Madeley A (2023), Midwifery Matters no 177, Summer 2023, pp 10-11

The author her motivation for studying for an MSc and, eventually, a PhD. (MB)

2023-07519

From girlhood into womanhood: learning the art of midwifery. Anonymous (2023), Midwifery Matters no 177, Summer 2023, pp 8-9

The author reflects on her decision to abandon her midwifery studies in Australia and to volunteer at the Da-a-Luz-Oasis midwifery school in the Alpujarra mountains in Spain. (MB)

2023-07517

Being a student midwife in Brazil and in the UK - the best (and worst) of both sides. Lee R (2023), Midwifery Matters no 177, Summer 2023, pp 6-7

The author shares her experience of studying on a direct entry midwifery course in Brazil, comparing it to life as a student midwife in the UK. (MB)

2023-06735

The One-Minute Preceptor Model for Midwives. Penwell V (2023), Midwifery Today no 145, Spring 2023

This helpful article details the one-minute preceptor model for teaching and learning. Vicki, who works in the Philippines, discusses the five basic micro-skills and provides examples of how they can be applied. (Author)

2023-06733

The Value of An Accredited Midwifery Education. Benoit K (2023), Midwifery Today no 145, Spring 2023

The author focuses on the advantages of an accredited midwifery education and how to go that route. (Author)

2023-06701

Human Rights in Childbearing 9. Framing Human Rights within a Concept-based Midwifery Curriculum. Brown S, Roberts J (2023), The Practising Midwife vol 26, no 5, May 2023, pp 14-17

The new NMC standards for midwifery education present a challenge for midwifery educators in the UK as midwifery students are required to qualify with additional skills and competencies, as well as have the skills, knowledge and proficiencies to ensure inclusivity for each individual that accesses midwifery and maternity care. It is extremely challenging to prepare students for each and every practice scenario that they will encounter. The midwifery

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2023-06548

Factors that enhance midwifery students' learning and development of self-efficacy in clinical placement: A systematic qualitative review. Folkvord SE, Risa CF (2023), Nurse Education in Practice vol 66, January 2023, 103510

Aim

To conduct a systematic review and synthesis of qualitative studies to explore the significant factors that enhance midwifery students' learning experiences and development of self-efficacy in clinical placement.

Background

Midwifery education programs leading to registration as a midwife require students to achieve academic, clinical, and professional competence. Clinical placement comprises a significant part of the program as students work and are assessed under the direct supervision of the Registered Midwife or preceptor. This learning and teaching partnership aims to enable the transfer of knowledge, skills, and behavior, i.e., competence, while providing the opportunity for students to become socialized into the midwifery practice culture. Against this background, characterized by the shortage of midwives, declining fertility rates, and a stressful environment, students learn to become a midwife and develop self-efficacy. Self-efficacy is the belief in one's ability to master challenges, which is described as a component in learning theories. There seems to be a need to identify factors that contribute to this development.

Design

A qualitative systematic literature review.

Method

A systematic database search was conducted to identify primary peer reviewed qualitative literature published between 2000 and 2021 that has explored what enhances midwifery students' learning during their clinical placement. The databases searched included CINAHL (EBSCO), Medline (Ovid), Embase (Ovid), PsycINFO (Ovid), JBI Joanna Briggs Institute (Ovid), SveMed+ , and Web of Science. The search yielded a total of 354 results, of which 22 met the inclusion criteria. The relevant findings from the 22 studies were thematically analyzed and presented in the results.

Results

The analysis revealed two descriptive themes – 'A nurturing relationship' and 'Predictability in the learning process, contextual factors. In addition, one analytic theme emerged – 'Gaining access to and belonging in an enabling educational and working culture'.

Conclusion

The relationship with the preceptor is a prerequisite for midwife students learning process and achievement of self-efficacy. A learning culture appears to be the fertile ground in which midwife students thrive and where they develop the self-efficacy needed to meet the demands of clinical placement. (Author)

Full URL: <https://doi.org/10.1016/j.nepr.2022.103510>

2023-06531

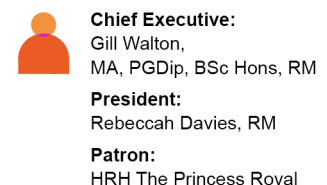
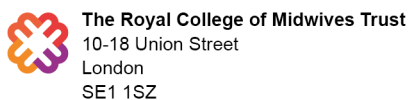
Impact of women's feedback on midwifery student learning: A thematic analysis of students' reflections. Tickle N, Creedy DK, Carter AG, et al (2023), Women and Birth: Journal of the Australian College of Midwives vol 36, no 6, November 2023, pp e591-e597

Problem

Little is known about the educational impact of providing routine, online feedback from women on midwifery student learning and clinical practice.

Background

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Feedback on students' clinical performance has historically been provided by lecturers and clinical supervisors.

Women's feedback is not routinely collected or evaluated for impact on student learning.

Aim

To evaluate the impact of women's feedback about continuity of care experiences with a midwifery student on learning and practice.

Design

Descriptive, exploratory qualitative study.

Methods

All second-and third-year Bachelor of Midwifery students undertaking clinical placement between February and June 2022 at one Australian university, submitted formative, guided written reflections on de-identified women's feedback they received through their ePortfolio. Data were analysed using reflexive thematic analysis.

Findings

Forty-four of the 69 eligible students (64%) submitted reflections on feedback received. Three themes emerged: 1) Confidence boosting, 2) Deeply integrating Midwifery Metavalues, and 3) Enhancing commitment to continuity. Three subthemes: connection, future practice and advocacy were identified. Women's feedback positively impacts student learning and places the woman in the educational feedback loop.

Conclusion

This study is an international first evaluating the impact of feedback from women on midwifery students' learning. Students reported greater confidence in their clinical practice, a deeper understanding of their midwifery philosophy, and an intention to advocate for, and work in, midwifery continuity models after graduation. Routine feedback about women's experiences should be embedded into midwifery education programs. (Author)

Full URL: <https://doi.org/10.1016/j.wombi.2023.05.005>

2023-06435

A comparison of birth-fall protective apparatus with conventional setting on nursing students' self-efficacy and skill in simulated vaginal parturition: A randomized trial. Krungkraipetch K (2022), African Journal of Reproductive Health vol 26,

no 1, 2022, pp 24-35

Undergraduate nursing students must study and train on simulation before patient practices because of patient safety policy. Their most concerns were the inadvertent mistakes, particularly in obstetrical training, which had limited room for supervisors to assist them in any phase. As a result, their self-efficacy was one of the important factors that contributed to their learning success. This research was a randomized trial design in 120 nursing students who volunteered to improve their self-efficacy in vaginal birth training by applying birth-fall protective apparatus to conventional simulation settings. When compared to another intervention station, the educational self-efficacy score at the intervention station was statistically significantly higher. ($t = 7.33, p < .01$) Furthermore, this station's clinical performance ratings were higher than the conventional station's. ($t = 4.69, p < .01$) Most students were pleased with this safety apparatus and required to use it in their practices. (Author)

2023-06290

Continuity and midwifery practice: a case study, with a focus on the midwife–mother relationship and advocating for women and their families. Rollinson L (2023), MIDIRS Midwifery Digest vol 33, no 2, June 2023, pp 146-153

Midwifery continuity of carer (MCoC) is a key theme in the Nursing and Midwifery Council's (NMC 2019) Standards of proficiency for midwives. At the point of registration, midwives must demonstrate that they can provide MCoC across the perinatal period in diverse settings for women, neonates and their families to provide safe and effective midwifery care (NMC 2019). With the continuing drive to implement MCoC in maternity services, and to prepare student midwives to work effectively within these models, the practice learning experience of student midwives has evolved to encompass MCoC (Royal College of Midwives (RCM) 2020, NHS England & NHS Improvement 2021). (Author)

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2023-06289

The impact of the Pregnancy Sickness Support training session on the knowledge and attitudes of student midwives towards hyperemesis gravidarum: an evaluative research project. Knight G, Dean C (2023), MIDIRS Midwifery Digest vol 33, no 2, June 2023, pp 140-145

Background

Hyperemesis gravidarum is a severe but stigmatised condition of pregnancy. Patients with the condition report feeling unsupported by health care professionals. There is a need to improve midwifery education in this area.

Aims

To evaluate the Pregnancy Sickness Support charity's training session on hyperemesis gravidarum as to its effect on the knowledge and attitudes of student midwives.

Methods

A quantitative study to survey student midwives completing pre-registration midwifery education in the UK, before and after the online training session. Descriptive statistics were generated.

Findings

Two-hundred and twenty-six students responded to the 'before' survey, of which 69 students responded to the 'after' survey. Students reported an increase in knowledge and changes in attitude towards hyperemesis gravidarum after the training session.

Conclusion

This study suggests that the Pregnancy Sickness Support training session is beneficial for improving midwifery students' knowledge and attitudes around HG.

Keywords

hyperemesis gravidarum, attitudes, student midwives, education, survey

Key points

- Hyperemesis gravidarum is a severe yet stigmatised condition of pregnancy.
- Pre-registration midwifery education has a role to play in improving knowledge and attitudes.
- Student midwives taking part in the study reported increased knowledge and changes in attitude towards hyperemesis gravidarum after a training session on the subject.
- Hesitation remains around the use of medication to treat symptoms of hyperemesis gravidarum.

Reflective questions

- What has been your treatment of those presenting with hyperemesis gravidarum?
- Do you feel that your treatment could have been different?
- How do you talk about those with hyperemesis gravidarum to your colleagues?
- Do you feel that you have enough knowledge and experience to support those with hyperemesis gravidarum?
- How could you help your team to increase their knowledge of hyperemesis gravidarum? (Author)

2023-06285

The experience of midwifery students using simulation-based learning in undergraduate education — a systematic review. Harrison S (2023), MIDIRS Midwifery Digest vol 33, no 2, June 2023, pp 123-129

Objective

Simulation is used in midwifery education to teach the management of emergencies that are rare in clinical practice and to assess practice. This qualitative systematic review aimed to explore the experience of undergraduate midwifery students using simulation-based learning.

Methods

A systematic review of the CINAHL Complete, MEDLINE, Education Resources Information Center (ERIC) and Maternity and Infant Care (MIC) databases was carried out, using identified keywords with clear inclusion and exclusion criteria applied. A primary focus was on qualitative studies but quantitative studies were included if qualitative data were reported. Identified studies were critically appraised using an appraisal checklist. A thematic analysis using meta-aggregation followed to identify the themes and to synthesise the findings.

Results

A total of five synthesised findings emerged from the meta-aggregation of 21 categories across the 13 included

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studies. The identified findings remind us that all elements of the simulation are relevant, that simulation must offer realism and that simulation is beneficial for the transfer from theoretical knowledge to practice. It is also shown that simulation elicits emotional responses and enables the development of communication skills and team working.

Conclusion

Simulation-based learning has a place in undergraduate midwifery programmes and students often voice differing experiences. Educational institutions need to plan adequate funding for capital outlay, consumables, and staffing. Educationalists need to be appropriately trained and must maintain levels of competence for teaching simulation-based education. Students need to be aware of the learning outcomes associated with simulation and must appreciate the relevance of this method of education. A suggestion for future research is identified regarding virtual reality simulation. (Author)

2023-06157

Uncertainty and flexibility: Midwifery students' experience during the COVID-19 pandemic in Aotearoa New Zealand.

Jackson T, Gilkison A, McAra-Couper J, et al (2023), New Zealand College of Midwives Journal no 59, 2023, pp 21-28

Introduction: The initial COVID-19 lockdown in Aotearoa New Zealand (Aotearoa NZ) in 2020, likely resulted in significant disruption to maternity care and midwifery education. Therefore, we asked the question, "What was the experience of student midwives studying and providing maternity care during the COVID-19 pandemic in Aotearoa NZ?"

Aim: Our aim was to explore the impact of the 2020 lockdown phase of the COVID-19 pandemic for student midwives in Aotearoa NZ.

Method: This qualitative descriptive study used semi-structured interviews to explore the impact of alert levels 3 and 4 COVID-19 lockdowns in 2020. Inductive thematic analysis was used to identify codes and generate themes and sub-themes from the interview transcripts.

Findings: Seven midwifery students described their experiences from which two overall themes were identified. The first of these was Uncertainty in which participants described insecurity, loss of control, isolation and constant worry. On the positive side they described Flexibility and Resilience – the ability to be flexible as they moved to more frequent use of online platforms, which provided connection with their peers; and resilience where the pandemic was considered beneficial by some for the future as it built their ability to face unanticipated challenges in their midwifery practice.

Conclusion: During a pandemic, anxiety, isolation and insecurity are common and our participants felt additional institutional support for student midwives was required. We concluded that it is essential to acknowledge the anxiety and individual needs of all students and check in with them regarding their physical and mental wellbeing. Setting up online platforms and facilitating connections between tutors and peers may provide more structural support. (Author)

Full URL: <https://www.midwife.org.nz/wp-content/uploads/2023/04/Jnl-59-2023-article-3-students-during-Covid-lockdown.pdf>

2023-06046

Teaching Professional Peer Review With the Use of Simulation. Cole LJ, Andrighetti TP, Thrower EJB, et al (2023), The Journal of Perinatal and Neonatal Nursing vol 37, no 2, April/June 2023, pp. 108-115

Background:

Quality improvement practices such as peer review and just culture are important components of patient safety initiatives, and health professions students should be introduced to these practices during their education.

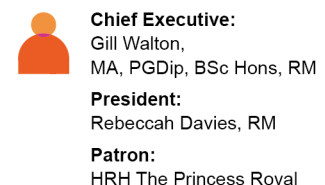
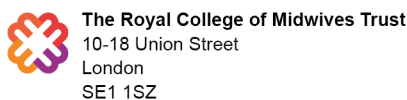
Purpose:

The purpose of this study was to evaluate a peer-review simulation learning experience using just culture principles in a graduate-level, online nursing education program.

Methods:

The students rated their learning experience with high, positive scores in all 7 domains on the Simulation Learning

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Experience Inventory. Responses to the open-ended question indicated that the students thought the experience provided opportunities for deep learning, increased confidence, and enhanced critical thinking skills.

Conclusion:

A peer-review simulation program using just culture principles provided a meaningful learning experience for graduate-level students in an online nursing education program. (Author)

2023-06040

The Impact of an Educational Intervention on Neonatal Care and Survival. Emmanuel A, Kain VJ, Forster E (2023), The Journal of Perinatal and Neonatal Nursing vol 37, no 2, April/June 2023, pp. 138-147

Objective:

Under-5 mortality has declined globally; however, proportion of under-5 deaths occurring within the first 28 days after birth has increased significantly. This study aims to determine the impact of an educational intervention on neonatal care and survival rates in Nigeria.

Methods:

This was a sequential exploratory mixed-methods design involving 21 health workers in the preintervention phase, while 15 health workers and 30 mother-baby dyads participated in the postintervention phase. Data were collected using semistructured interviews and nonparticipatory observation. Qualitative data were analyzed using thematic analysis, while quantitative data were analyzed using descriptive and inferential statistics.

Results:

Healthy newborns were routinely separated from their mothers in the preintervention period. During this time, non-evidence-based practices, such as routine nasal and oral suctioning, were performed. Skin-to-skin contact and early initiation of breastfeeding were frequently interrupted. After the intervention, 80.6% were placed in skin-to-skin contact with their mothers, and 20 of these babies maintained contact with the mother until breastfeeding was established. There was decline in neonatal deaths post-intervention. Independent t-test analysis of the day of neonatal death demonstrates a significant difference in mean ($P = .00$, 95% confidence interval -5.629 ; -7.447 to -4.779).

Conclusion:

Newborn survival can be improved through regular training of maternity health workers in evidence-based newborn care. (Author)

2023-06038

Evaluation of Online Distant Synchronous Interprofessional Simulations. Perry A, Andrighetti T (2023), The Journal of Perinatal and Neonatal Nursing vol 37, no 2, April/June 2023, pp. 123-130

Introduction:

Formative interprofessional education is an accreditation standard for health professional student populations. This study examined the perception of midwifery students and obstetrics and gynecology (OB-GYN) residents participating in distance synchronous interprofessional simulation.

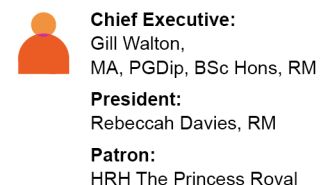
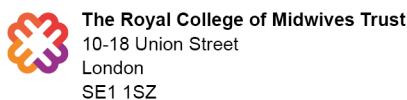
Methods:

Students participated in an interprofessional simulation in an interactive video conferencing environment. Participants were midwifery students and OB-GYN residents from unaffiliated, geographically distant educational programs. Students' feedback was collected with a survey after the simulation session.

Results:

Eighty-six percent of midwifery students strongly agreed they felt better prepared for team-based care in future

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practice after the simulation, whereas 59% of OB-GYN students strongly agreed. Seventy-seven percent of midwifery students strongly agreed they were more clear on the scope of practice of the other profession after the simulation, whereas 53% of OB-GYN students strongly agreed. Eighty-seven percent of midwifery students and 74% of OB-GYN residents strongly agreed the distance synchronous simulation was a positive learning experience.

Discussion:

This study demonstrated that midwifery students and OB-GYN residents valued the experience of distance synchronous interprofessional education. Most learners reported feeling better prepared for team-based care and gained a better understanding of each other's scope of practice. Distance synchronous simulations can increase midwifery students' and OB-GYN residents' access to interprofessional education. (Author)

2023-06033

Using Collaborative Online International Learning to Support Global Midwifery Education. Saftner MA, Ayebare E (2023), The Journal of Perinatal and Neonatal Nursing vol 37, no 2, April/June 2023, pp. 116-122

Background and Local Problem:

The COVID-19 pandemic created a gap in global health learning, requiring creative solutions to bridge the divide. Collaborative online international learning (COIL) is a program between universities located in different geographic areas that aims to build cross-cultural learning and collaboration.

Intervention:

Faculty members from Uganda and the United States worked collaboratively to plan a 2-session COIL activity for nursing and midwifery students. Twenty-eight students from the United States and Uganda participated in the pilot quality improvement project.

Measures:

Students completed a 13-question REDCap survey measuring satisfaction, time commitment for the activity, and increase in knowledge about differently resourced healthcare systems. Students also were asked to provide qualitative feedback in that survey.

Results:

Survey results indicate a high level of satisfaction and an increased understanding of a new healthcare system. The majority of students wanted more scheduled activity times, the opportunity to meet face to face, and/or more robust sessions in the future.

Conclusion:

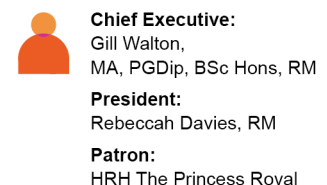
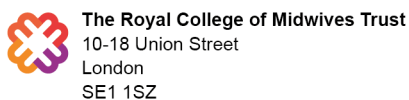
This COIL activity between students in the United States and Uganda was a no-cost activity that provided global health learning opportunities for students during the global pandemic. The COIL model is replicable, adaptable, and customizable for a variety of courses and time spans. (Author)

2023-05109

Using reflection: Mentoring midwifery students in India. Hawley G, Tuckett AG (2020), Health Education in Practice : Journal of Research for Professional Learning vol 3, no 2, December 2020, pp 70-82

Purpose: This study aims to offer guidance to lecturers and undergraduate midwifery students in using reflective practice and to offer a roadmap for academic staff accompanying undergraduate midwifery students on international clinical placements. **Design:** Drawing on reflection within the Constructivist Theory, the Gibbs Reflective Cycle (GRC) provides opportunities to review experiences and share new knowledge by working through five stages-feelings, evaluation, analysis, conclusion and action plan. **Findings:** The reflections of the midwifery students in this study provide insight into expectations prior to leaving for international placement, practical aspects of what local knowledge is beneficial, necessary teaching and learning strategies and the students' cultural awareness growth.

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Implications: The analysis and a reflective approach have wider implications for universities seeking to improve preparations when embarking on an international clinical placement. It can also inform practices that utilise reflection as an impetus to shape midwifery students to be more receptive to global health care issues. (Author)

2023-04958

An audit review of midwifery qualifications and distribution in Zambia. Mwamba B, Nyemba DC, Al-Nsour EA, et al (2023), African Journal of Midwifery and Women's Health vol 17, no 1, January 2023

Background

In Zambia, the last decade has seen the development of multiple midwifery qualification, including direct-entry midwifery, an advanced diploma in nursing and midwifery, or a Bachelor of Science, Master of Science or Doctor of Philosophy in midwifery programme. Despite advancements in midwifery training, there is no research on different categories of midwifery qualifications in Zambia and their competencies. Therefore, there is a need to review midwifery qualifications and the distribution of midwives in Zambia. The aim of this audit review was to evaluate qualification categories of midwives currently registered with the General Nursing and Midwifery Council of Zambia and the distribution of midwives across Zambia.

Methods

An audit review of midwifery qualifications and their distribution across Zambia was undertaken using the General Nursing and Midwifery Council of Zambia's register of nurses and midwives 2020. Data were extracted from the report and presented as frequencies.

Results

A total of 6112 midwives were registered by the General Nursing and Midwifery Council of Zambia at the time of data collection, of which the majority (87.6%) were women and registered nurse midwives (52.7%). The most common place of practice was a hospital (41.5%) and the greatest proportion of midwives worked in Lusaka (24.6%).

Conclusions

This audit review provides insights into midwifery qualification categories in Zambia and their distribution, and indicates that levels of practice should be clearly defined in terms of their competencies. With advancements in midwifery training, the authors believe there will be an increase in midwives' autonomy and their involvement in decision making at all levels of care. (Author)

2023-04924

Public Health Series Part 2 – Language Matters: Health Promotion. Bresson J (2023), The Student Midwife vol 6, no 2, April 2023, p 26

An overview on the importance of communication and language in health and maternity health services. (AS)

2023-04919

Acknowledging religious faith as part of personalised care. Hylton-Potts A (2023), The Student Midwife vol 6, no 2, April 2023, pp 22-25

Alison Hylton-Potts reflects upon her time as a student in 2021 and a practice experience that led her to develop a resource for midwives, focusing on the provision of individualised care to people with different faiths. (Author)

2023-04916

Exploring Jewish Birth and Culturally Sensitive Care. Perlman JF, Hertz A (2023), The Student Midwife vol 6, no 2, April 2023, pp 16-19

A small and vibrant ethnoreligious community, Jewish people account for less than half a percent of the UK population. Often overlooked in wider discourse on cultural competency, Jewish women and families also have

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specific care needs for their psychological and spiritual safety. This article introduces key concepts relating to childbearing in Judaism as well as Jewish religious life, with a view to supporting students and midwives to provide culturally sensitive maternity care for Jewish families. (Author)

2023-04755

A literature review and proposed framework for a core curriculum in obstetrics and gynecology for medical students globally. Atiomo WU, Stanley AG, Ezimokhai MM (2023), International Journal of Gynecology & Obstetrics vol 161, no 2, May 2023, pp. 389-396

Background

There have been challenges in deciding the curricular content in obstetrics and gynecology (Ob/Gyn) for medical students because the core knowledge, competencies, and duration of Ob/Gyn clerkships, varies widely by country.

Objectives

To investigate current recommendations for Ob/Gyn curricula for medical students globally, in a rapid review of the literature and websites of a selection of medical schools.

Search Strategy

A targeted search of selected databases (PubMed and Google Scholar) using relevant key words and a search of university websites.

Selection Criteria

Studies that applied to medical or undergraduate students in Ob/Gyn.

Data Collection and Analysis

A standardized extraction form on Microsoft excel to extract and chart data.

Main Results

We identified recommendations from national professional bodies (Royal College of Obstetricians and Gynaecologists, Royal Australian and New Zealand College of Obstetricians and Gynaecologists, Association of Professors of Gynecology and Obstetrics, and the Turkish-National Core Curriculum), and descriptions from five university websites. We also identified additional objectives, including teaching on intimate partner violence, health priorities in low- and middle-income countries, and a variation in practical skills recommended.

Conclusions

Fitting all the recommended curricula content into medical student Ob/Gyn clerkships is a challenge. A framework to address this, for consideration by the International Federation of Gynaecology and Obstetrics and other stakeholders, is proposed in which priority is given to topics related to emergency Ob/Gyn, history taking, and examination of the pregnant and non-pregnant patient. (Author)

2023-04698

The use of a novel sensorized simulation platform for real-time labor progression assessment. Mannella P, Tognarelli S, Pancetti F, et al (2023), International Journal of Gynecology & Obstetrics vol 161, no 2, May 2023, pp 499-508

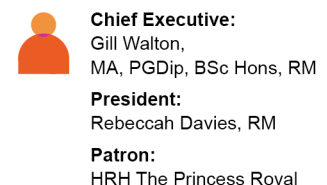
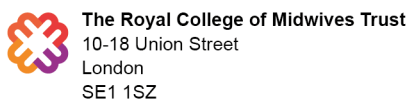
Objective

To prove the potentialities of an integrated and sensorized childbirth platform as an innovative simulator for education of inexperienced gynecological and obstetrical medical students.

Methods

A total of 152 inexperienced medical students were recruited to a simulation program on labor progression evaluation. After an introductory lecture on basic concepts of labor and birth given by an expert gynecologist, three

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different gynecologic scenarios were simulated using both a traditional obstetric simulator and the innovative proposed platform, for a total of six tests for each student. A score was assigned for each performed scenario, based on its correctness. Self-assessment questionnaires were compiled before and after the simulation program for additional subjective assessment.

Results

Median score of the simulations performed with our platform was significantly higher than that of the simulations performed with a traditional simulator, for all the three experimented scenarios ($P < 0.001$).

Conclusions

The use of a sensorized platform for labor progression allowed for an accurate and faster diagnosis if compared with a traditional simulator even for inexperienced operators, supporting its use in clinical training, which could be realistically introduced into the clinical practice for medical student education. (Author)

2023-04280

Traditional Practices in Relation to Pregnancy, Childbirth, Postpartum Period, and Newborns in Turkey From an Interregional Perspective. Sivrikaya SK, Türkmen H (2023), International Journal of Childbirth vol 12, no 4, 2023, pp 201-216

AIM

The aim of this study was to identify the level of knowledge of students on traditional practices related to pregnancy, childbirth, the postpartum period and the newborn in Turkey and present the geographical regions of Turkey where traditional practices are more common.

METHODS

This cross-sectional study was performed with the participation of 375 students enrolled at the Midwifery and Nursing Departments of the Faculty of Health Sciences of a university in the Marmara Region located in northwestern Turkey. The data were collected through a Personal Information Form and a Traditional Beliefs and Practices Form created by the researchers. Means, standard deviations, minimum and maximum values, frequencies, and percentages were utilized in the statistical analyses.

RESULTS

The mean age of the participants was 20.51 ± 2.44 years, 44.5% of them lived in the Marmara Region of Turkey, and most of their parents were primary school graduates. In this study, it was found that most students were not familiar with traditional practices in relation to pregnancy, childbirth, postpartum and newborns in Turkey. It was also ascertained that the beliefs held by the students about pregnancy, childbirth, postpartum and newborns differed across regions. It was found that most students did not know the harmful traditional practices performed for making childbirth easier. Most students were knowledgeable about harmful traditional practices about postpartum. Some of the harmful traditional practices applied to the newborn were determined to be unknown to the students.

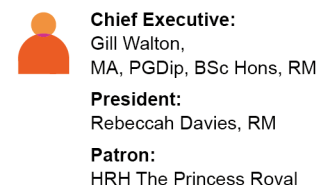
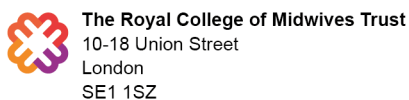
CONCLUSION

In conclusion, in this study, it was identified that most students were not familiar with traditional practices related to pregnancy, childbirth, the postpartum period and newborns in Turkey. Before student midwives and nurses have started their careers, they should be informed about traditional beliefs and practices of the society in which they live, and they should be capable of making holistic and comprehensive evaluations. Because of this study, it is recommended that traditional beliefs and practices be included in the curricula of midwifery and nursing schools with particular emphasis on the geographical regions of Turkey. (Author)

2023-04264

Midwifery students witnessing violence during labour and birth and their attitudes towards supporting normal labour: A cross-sectional survey. Schoene BEF, Oblasser C, Stoll K, et al (2023), Midwifery vol 119, April 2023, 103626

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This study explored whether students had observed violence during childbirth perpetrated by health care professionals, and if so whether midwifery students' attitudes towards supporting normal birth had been changed by these observations. Describes any self-reported effects of their experiences, including stress and intentions to leave. (JSM)

Full URL: <https://www.sciencedirect.com/science/article/pii/S0266613823000293>

2023-04216

The psychological effects of working in the NHS during a pandemic on final-year students: part 2. Kane C, Wareing M, Rintakorpi E (2022), *British Journal of Nursing* vol 31, no 2, January 2022

This study explored the psychological experience of a small cohort of nursing and midwifery students who had been deployed to work in the NHS during the COVID-19 pandemic. The students were employed on band 4 contracts within an acute NHS Trust in the South of England. Overall, students found the experience of being deployed into clinical practice during a major public health emergency a valuable and unique experience that strengthened their resilience. However, students reported a significant level of personal obligation to opt-in to deployment. Working within clinical areas caused heightened anxiety and uncertainty, which was alleviated by managerial support. (Author)

2023-04111

University of Newcastle, New Colombo Mobility Program - Cambodia. Cummins A (2022), *Australian Midwifery News* vol 31, no 1, December 2022, pp. 52-53

The Australian Government New Colombo Mobility program aims to lift knowledge in Australia of the Indo-Pacific by supporting Australian undergraduates to study in the region. Associate Professor Allison Cummins, Head of the Midwifery Discipline at the University of Newcastle was successfully awarded a grant in 2022. The host for the tour was United Nations Population Fund (UNFPA) Cambodia. They hosted the University of Newcastle and arranged midwifery education and professional experience placement for the students. Following arrival, the group were oriented to the UNFPA service at their offices in Phnom Penh. The organisation has been successful in implementing strategies in alignment with the Sustainable Development Goals including a reduction in maternal mortality rates and family planning. (Author)

2023-04028

Consent during labour and birth as observed by midwifery students: A mixed methods study. Lee N, Kearney L, Shipton E, et al (2023), *Women and Birth: Journal of the Australian College of Midwives* vol 36, no 6, November 2023, pp e574-e581

Background

While consent is an integral part of respectful maternity care, how this is obtained during labour and birth presents conflicting understandings between midwives' and women's experiences. Midwifery students are well placed to observe interactions between women and midwives during the consent process.

Aim

The purpose of this study was to explore the observations and experiences of final year midwifery students of how midwives obtain consent during labour and birth.

Methods

An online survey was distributed via universities and social media to final year midwifery students across Australia. Likert scale questions based on the principles of informed consent (indications, outcomes, risks, alternatives, and voluntariness) were posed for intrapartum care in general and for specific clinical procedures. Students could also record verbal descriptions of their observations via the survey app. Recorded responses were analysed thematically.

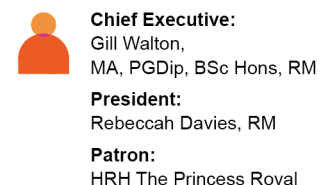
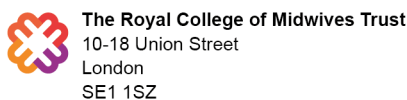
Findings

225 students responded with 195 completed surveys; 20 students provided audio recorded data. Student's observations suggested that the consent process varied considerably depending on the clinical procedure. Discussions of risks and alternatives during labour were frequently omitted.

Discussion

The student's accounts suggest that in many instances during labour and birth the principles of informed consent are

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not being applied consistently. Presenting interventions as routine care subverted choice for women in favour of the midwives' preferences.

Conclusions

Consent during labour and birth is invalidated by a lack of disclosure of risks and alternatives. Health and education institutions should include information in guidelines, theoretical and practice training on minimum consent standards for specific procedures inclusive of risks and alternatives. (Author)

Full URL: <https://doi.org/10.1016/j.wombi.2023.02.005>

2023-04027

Can peers improve student retention? Exploring the roles peers play in midwifery education programmes in Canada.

Neiterman E, Beggs B, HakemZadeh F, et al (2023), Women and Birth: Journal of the Australian College of Midwives vol 36, no 4, July 2023, pp e453-e459

Problem

Peer support is understudied as a factor that can impact midwifery student retention.

Background

Retention of midwifery students is essential for creating a sustainable maternity care workforce. Research shows that peer support positively influences students' experiences, but it needs more focus on the role peers play in student retention.

Aim

We aimed to examine how peer support can facilitate midwifery students' retention by exploring the role peers play in students' experiences and identifying the types of support students offer each other.

Methods

We conducted 31 semi-structured interviews with students attending Midwifery Education Programmes across Canada. Data were analysed inductively, following the constructivist grounded theory method.

Findings

While motivated and engaged peers improved students' learning experiences and desire to remain in their program, peers who created an overly competitive academic environment hindered learning. Students also noted that a lack of diversity, particularly of Black and Indigenous peers, limited their ability to learn about culturally safe care. Most students felt a sense of community and relied on one another for emotional, academic, and instrumental support.

Discussion

Peer support has mostly positive effects on student learning and should be formalized by midwifery educators to improve retention. Reducing pressure to succeed, targeting recruitment of students who are Black, Indigenous, and People of Colour, and establishing formal mentorship programmes could enhance the role peers play in student retention.

Conclusion

While retention of students is a complex issue, positive interactions with peers can create a stimulating learning environment and increase students' desire to stay in their programme. (Author)

Full URL: <https://doi.org/10.1016/j.wombi.2023.02.004>

2023-04026

An analysis of the global diversity of midwifery pre-service education pathways. Neal S, Nove A, Bar-Zeev S, et al (2023),

Women and Birth: Journal of the Australian College of Midwives vol 36, no 5, September 2023, pp 439-445

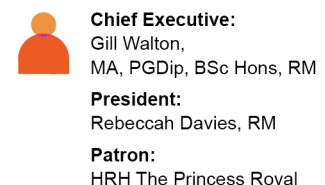
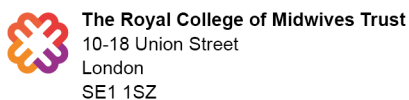
Background

The development of competent professional midwives is a pre-requisite for improving access to skilled attendance at birth and reducing maternal and neonatal mortality. Despite an understanding of the skills and competencies needed to provide high-quality care to women during pregnancy, birth and the post-natal period, there is a marked lack of conformity and standardisation in the approach between countries to the pre-service education of midwives.

This paper describes the diversity of pre-service education pathways, qualifications, duration of education programmes and public and private sector provision globally, both within and between country income groups.

Methods

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We present data from 107 countries based on survey responses from an International Confederation of Midwives (ICM) member association survey conducted in 2020, which included questions on direct entry and post-nursing midwifery education programmes.

Findings

Our findings confirm that there is complexity in midwifery education in many countries, which is concentrated in low- and middle-income countries (LMICS). On average, LMICs have a greater number of education pathways and shorter duration of education programmes. They are less likely to attain the ICM-recommended minimum duration of 36 months for direct entry. Low- and lower-middle income countries also rely more heavily on the private sector for provision of midwifery education.

Conclusion

More evidence is needed on the most effective midwifery education programmes in order to enable countries to focus resources where they can be best utilised. A greater understanding is needed of the impact of diversity of education programmes on health systems and the midwifery workforce. (Author)

Full URL: <https://doi.org/10.1016/j.wombi.2023.03.002>

2023-03143

Taking up the challenge of trans and non-binary inclusion in midwifery education: Reflections from educators in Aotearoa and Ontario Canada. Parker G, Kelly L, Miller S, et al (2023), *Midwifery* vol 118, March 2023, 103605

Perinatal services are being challenged to acknowledge that not all pregnant and birthing people are women and to ensure the design and delivery of services that are inclusive of, and deliver equitable outcomes for, trans, non-binary, and other gender diverse people. This is posing unique challenges for midwifery with its women-centred philosophy and professional frameworks. This paper presents the critical reflections of midwifery educators located in two midwifery programmes in Aotearoa¹ and Ontario Canada, who are engaged in taking up the challenge of trans and non-binary inclusion in their local contexts. The need to progress trans and non-binary inclusion in midwifery education to secure the human rights of gender diverse people to safe midwifery care and equitable perinatal outcomes is affirmed. We respond to an existing lack of research or guidance on how to progress trans and non-binary inclusion in midwifery education. We offer our insights and reflections organised as four themes located within the frameworks of cultural humility and safety. These themes address midwifery leadership for inclusion, inclusive language, a broader holistic approach, and the importance of positioning this work intersectionally. We conclude by affirming the critical role of midwifery education/educators in taking up the challenge of trans and non-binary inclusion to ensure a future midwifery workforce skilled and supported in the provision of care to the growing gender diverse population. (Author)

Full URL: <https://doi.org/10.1016/j.midw.2023.103605>

2023-03038

Kent student midwife programme at risk of axe by NMC. Mitchell G (2023), *Nursing Times* 3 March 2023

The midwifery programme at Canterbury Christ Church University is under threat of being shut down by the Nursing and Midwifery Council due to concerns over safety and quality. (Author)

2023-02821

Significant event reflection: a focus on breastfeeding. Rollinson L (2023), *MIDIRS Midwifery Digest* vol 33, no 1, March 2023, pp 90-93

During my community placement as a third-year student midwife, I was supported by my practice supervisor to provide care, under minimal supervision, for pregnant women who were attending antenatal appointments. During these appointments, I would take the lead in providing care, however, if I had any questions or concerns or felt that I was in a situation that was beyond the limits of my competence, my supervisor was able to support me, and take over the care if required. (Author)

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2023-02788

A student midwife's experience of bereavement care during the COVID-19 pandemic. Carter HE (2023), MIDIRS Midwifery Digest vol 33, no 1, March 2023, pp 61-63

This reflection explores a student midwife's experience of providing bereavement care to a family during the COVID-19 pandemic. Reflective practice allows people to examine their actions and experiences, with the aim of developing clinical skills and knowledge (Caldwell & Grobbel 2013). It allows students to consider clinical experiences from different perspectives and improve their decision-making skills (Chong 2009), promoting continuous development in practice. Reflection has been described as an effective method of dealing with emotional challenges (Rees 2012) such as processing experiences caring for a bereaved family, as discussed in this reflective essay using Borton's model (1970, cited in Jasper 2013). (Author)

2023-02757

Reframing leadership for student midwives. Beckford-Procyk C (2023), MIDIRS Midwifery Digest vol 33, no 1, March 2023, pp 6-8

There are many things student midwives need to consider throughout their studentship. Completion of practice hours, passing assessments and maintaining their health and wellbeing, to name but a few. One thing that may not be emphasised is leadership and, specifically, how student midwives are in an excellent position to explore their passions to make tangible changes to their field. In this reflective piece the author reflects on their journey into student leadership and how it impacted their philosophy as a student and midwife. (Author)

2023-02580

Racial and Ethnic Composition of Neonatal Nurse Practitioner Faculty and Students in the United States. Newberry DM, Bell T (2023), Advances in Neonatal Care vol 23, no 2, April 2023, pp 132-139

Background:

Neonatal nurse practitioners have a strong presence in the neonatal intensive care unit and are primed to lead efforts to induce change related to health disparities. Underrepresented minority nurse practitioners offer valuable perspectives in the care of underrepresented minority patients. However, there remains a current racial and ethnic discordance between neonatal providers and patients. Efforts to eliminate health disparities must begin before nursing school. The current racial and ethnic composition of neonatal nurse practitioner faculty in comparison to students in the United States is unknown.

Purpose:

The purpose of this study was to determine the racial and ethnic composition of neonatal nurse practitioner faculty and students in the United States and contrast this data with available data for the racial and ethnic composition of the neonatal intensive care unit patient population.

Methods:

This cross-sectional study used a nonexperimental survey to describe the racial and ethnic composition of neonatal nurse practitioner faculty and students in the United States.

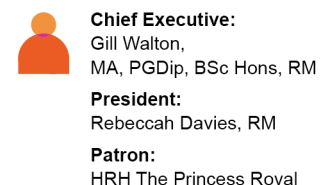
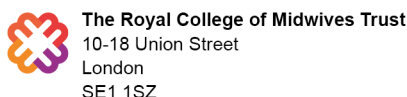
Results:

There was no significant difference in the racial and ethnic composition between neonatal nurse practitioner faculty and students. There were significant differences for all race distributions between neonatal nurse practitioner students and neonatal intensive care unit admissions.

Implications for Practice and Research:

The discordance between neonatal nurse practitioner students and neonates in the neonatal intensive care unit is important in addressing disparities and begins before nursing school. Identification of barriers and strategies for

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2023-02443

The Academic PMA... Supporting the Future Midwifery Workforce. Andrews J, Todd S, Armato-Harris P (2023), The Practising Midwife vol 26, no 2, February 2023, pp 42-46

Development of the A-EQUIP model followed recommendations suggesting that statutory supervision of midwifery, for a variety of reasons, was not fit for purpose. A culture of blame and accountability, poor teamwork and ineffective leadership were identified as key elements of failings in the previous midwifery supervision model. These were accepted by the Nursing and Midwifery Council (NMC) and statutory changes were made. The statutory changes meant that supervision and regulation of midwives should be divided with the NMC solely controlling all regulatory activity. This resulted in statutory midwifery supervision ceasing in April 2017 and changed to an employer-led model of support and supervision.. (Author)

2023-02438

Providing Accessible Healthcare For Autistic Women. Henry K (2023), The Practising Midwife vol 26, no 2, February 2023, pp 37-41

Narratives by autistic women regard their maternity-care experiences with feelings such as being isolated, neglected, stigmatised and judged. They feel hospital environments overload their senses which causes barriers to accessing maternity care. I have spent some time researching and creating a series of support plans to invite conversations between autistic women and maternity staff to create accessible, meaningful healthcare encounters. The aim of this article is to provide some ideas for care adjustments so that future narratives overflow with positive encounters. (Author)

2023-02437

The Role of Practice Development Midwives in Norfolk & Waveney's Local Maternity System – Part 3: Developing LMNs Local Learning Events. Noble P, Haskey M, Weatherill C (2023), The Practising Midwife vol 26, no 2, February 2023, pp 32-34

Welcome to the third episode in the mini-series focusing on the role of Practice Development Midwives (PDM) within the Norfolk and Waveney Local Maternity and Neonatal System (LMNS). The previous articles provided an overview of the role and explored the development of a blended-learning package. This article will explore sharing learning between three Norfolk maternity services through local learning events. (Author)

2023-02436

The Influence of Route of Entry on a Pre-Registration Midwifery Education Programme. (2023), The Practising Midwife vol 26, no 2, February 2023, pp 26-30

Entry to midwifery education in the United Kingdom (UK) typically requires three A-Levels. However, the commitment to widening access to university has led to a growing number of students accessing midwifery education with 'non-traditional' qualifications. It is not known if widening access to include such entry qualifications has an impact on degree attainment or retention of students in midwifery education. This retrospective cohort observation study looked at entry route and outcomes, in a single higher education midwifery programme. Findings identify that route of entry does not have an impact on retention of students or final degree classification awarded. (Author)

2023-02391

Embracing the continuity of care experience: A new Australian graduate entry master of midwifery course with a student caseload of 15 women per year. Kuliukas L, Warland J, Cornell P, et al (2023), Women and Birth: Journal of the Australian College of Midwives vol 36, no 2, March 2023, pp 151-154

Background

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Women receiving continuity of midwifery care have increased satisfaction and improved outcomes. Preparation of midwifery students to work in continuity models from the point of graduation may provide an ongoing midwifery workforce that meets rising demand from women for access to such care.

Aim of the paper

The aim of this paper is to describe an innovative midwifery course based on a continuity model, where students acquire more than 50 % of clinical hours through continuity of care experiences. Additional educational strategies incorporated in the course to enhance the CCE experience within the philosophy of midwifery care, include a virtual maternity centre, case-based learning and the Resources Activities Support Evaluation (RASE) pedagogical model of learning.

Discussion

Australian accredited midwifery courses vary in structure, format and philosophy; this new course provides students with an alternative option of study for those who have a particular interest in continuity of midwifery care.

Conclusion

A midwifery course which provides the majority of clinical hours through continuity of care may prepare graduates for employment within midwifery group practice models by demonstrating the benefits of relationship building, improved outcomes and the reality of an on-call lifestyle. (Author)

2023-02389

Emotional wellbeing of student midwives during COVID-19. Kuipers Y, Mestdagh E (2023), *Women and Birth: Journal of the Australian College of Midwives* vol 36, no 2, March 2023, pp 184-192

Background

Mental health of students in higher education was affected during the COVID-19 pandemic.

Aim

To examine the emotional wellbeing of midwifery students in the Netherlands and Flanders (Belgium) during COVID-19.

Methods

A cross-sectional online-based survey with 619 Dutch and Flemish midwifery students. Sociodemographic details were obtained. Anxiety and depression were measured twice (T1, T2) during the COVID-19 pandemic.

Findings

Flemish students had significantly higher mean depression and anxiety scores than Dutch students during the total period of study ($p < .001$; $p < .001$). Total group mean depression and anxiety scores were significantly higher at T2 compared to T1 ($p < .001$; $p < .001$). In the Dutch student group, there was a significant increase of depression from T1 to T2 ($p < .001$). In the Flemish student group, both depression and anxiety scores significantly increased from T1 to T2 ($p < .001$; $p < .001$). A history of psychological problems predicted both depression and anxiety, irrespective of COVID-19 period or country ($p < .001$; $p < .001$). Being single ($p.015$) and having a job ($p.046$) predicted depression, irrespective of period or country. A history of psychological problems predicted depression ($p.004$; $p < .001$) and anxiety ($p.003$; $p.001$) during the total period of study. Being single also predicted depression during T2 ($p.024$).

Conclusion

These findings inform how emotional wellbeing of midwifery students was affected during the COVID-19 pandemic and identify those students that might need extra attention after the pandemic, during another pandemic or similar situations with social restrictions. (Author)

Full URL: <https://doi.org/10.1016/j.wombi.2022.11.012>

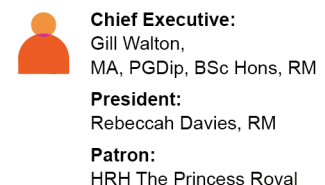
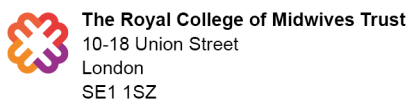
2023-02352

Diverse pre-service midwifery education pathways in Cambodia and Malawi: A qualitative study utilising a midwifery education pathway conceptual framework. Neal S, Bokosi M, Lazaro D, et al (2023), *Midwifery* vol 116, January 2023, 103547

Objectives

Educated and skilled midwives are required to improve maternal and newborn health and reduce stillbirths. There are three main approaches to the pre-service education of midwives: direct entry, post-nursing and integrated

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programmes combining nursing and midwifery. Within these, there can be multiple programmes of differing lengths and qualifications, with many countries offering numerous pathways. This study explores the history, rationale, benefits and disadvantages of multiple pre-service midwifery education in Malawi and Cambodia. The objectives are to investigate the differences in education, roles and deployment as well as how key informants perceive that the various pathways influence workforce, health care, and wider health systems outcomes in each country.

Design

Qualitative data were collected during semi-structured interviews and analysed using a pre-developed conceptual framework for understanding the development and outcomes of midwifery education programmes. The framework was created before data collection.

Setting

The setting is one Asian and one African country: Cambodia and Malawi.

Participants

Twenty-one key informants with knowledge of maternal health care at the national level from different Government and non-governmental backgrounds.

Results

Approaches to midwifery education have historical origins. Different pathways have developed iteratively and are influenced by a need to fill vacancies, raise standards and professionalise midwifery. Cambodia has mostly focused on direct-entry midwifery while Malawi has a strong emphasis on dual-qualified nurse-midwives. Informants reported that associate midwifery cadres were often trained in a more limited set of competencies, but in reality were often required to carry out similar roles to professional midwives, often without supervision. While some respondents welcomed the flexibility offered by multiple cadres, a lack of coordination and harmonisation was reported in both countries.

Key conclusions

The development of midwifery education in Cambodia and Malawi is complex and somewhat fragmented. While some midwifery cadres have been trained to fulfil a more limited role with fewer competencies, in practice they often have to perform a more comprehensive range of competencies.

Implications for practice

Education of midwives in the full range of globally established competencies, and leadership and coordination between Ministries of Health, midwife educators and professional bodies are all needed to ensure midwives can have the greatest impact on maternal and newborn health and wellbeing. (Author)

Full URL: <https://doi.org/10.1016/j.midw.2022.103547>

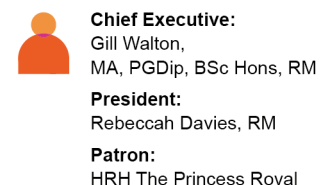
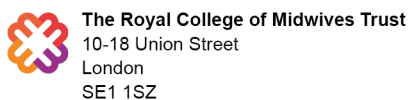
2023-02159

Implementation of a novel ultrasound training programme for midwives in Malawi: A mixed methods evaluation using the RE-AIM framework. Viner AC, Malata MP, Mtende M, et al (2023), *Frontiers in Global Women's Health* 18 January 2023, online

Introduction: Despite recommendation that all women receive an ultrasound in pregnancy prior to 24 weeks', this remains unavailable to many women in low-income countries where trained practitioners are scarce. Although many programmes have demonstrated efficacy, few have achieved longterm sustainability, with a lack of information about how best to implement such programmes. This mixed-methods study aimed to evaluate the implementation of a novel education package to teach ultrasound-naïve midwives in Malawi basic obstetric ultrasound, assessing its impact in the context of the Reach, Effectiveness, Adoption, Implementation and Maintenance (RE-AIM) framework.

Methods: The study ran across six sites in Malawi between October 2020 and June 2021, encompassing three phases;

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pre-implementation, implementation and post-implementation. Twenty nine midwives underwent a bespoke education package with matched pre and post course surveys assessed their knowledge, attitudes and confidence and “hands on” assessments evaluating practical skills. Training evaluation forms and in-depth interviews explored their satisfaction with the package, with repeat assessment and remote image review evaluating maintenance of skills.

Results: 28/29 midwives completed the training, with significant increases in knowledge, confidence and practical skills. Adherence to the education package varied, however many changes to the proposed methodology were adaptive and appeared to facilitate the efficacy of the programme. Unfortunately, despite reporting approval regarding the training itself, satisfaction regarding supervision and follow up was mixed, reflecting the difficulties encountered with providing ongoing in-person and remote support.

Conclusion: This programme was successful in improving trainees' knowledge, confidence and skill in performing basic obstetric ultrasound, largely on account of an adaptive approach to implementation. The maintenance of ongoing support was challenging, reflected by trainee dissatisfaction. By evaluating the success of this education package based on its implementation and not just its efficacy, we have generated new insights into the barriers to sustainable upscale, specifically those surrounding maintenance. (Author)

Full URL: <https://doi.org/10.3389/frhs.2022.953677>

2023-02055

Pre-registration midwifery education: adapting infant feeding observed simulated clinical examinations. Moorhead C, Lawther L, Kalu FA (2023), British Journal of Midwifery vol 31, no 2, February 2023

Digitally developed and virtually provided midwifery education has gathered momentum as a result of the COVID-19 pandemic. Preparing students for professional practice in a virtual environment creates challenges and creative opportunities for midwifery educators. Course designs and structures have been adapted to enable students to gain knowledge and experience of practicing in a virtual environment and approaches to assessment have also required adaptation. This article outlines how observed simulated clinical examinations were modified in conjunction with stakeholders from clinical practice and the breastfeeding community to ensure that they aligned with the local reality of virtual infant feeding support. Collaboration was required to ensure that the reality of student's experiences was captured in the assessment process. Challenges encountered included being sensitive to the fluidity of the clinical setting and ensuring that scenarios were relevant and created a sufficient challenge for students. Mitigating against students' concerns regarding virtual simulated clinical assessment should be incorporated into future adaptations of educational interventions and assessments. (Author)

2023-02048

Students stand at the door: exploring views on professionalism in midwifery spaces. Lewitt M, McEwan T (2023), British Journal of Midwifery vol 31, no 2, February 2023, pp 68-73

Background/Aims

Midwifery students learn and adopt complex professional behaviours in a variety of academic and clinical settings throughout their educational journey. The aims of this study were to explore how midwifery students understand the concept of professionalism and how their professional identity develops during midwifery education.

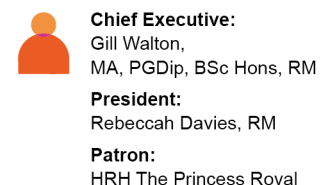
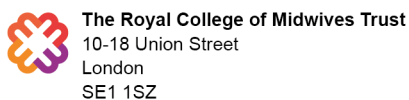
Methods

A conversation about professionalism with a group of final year midwifery students was transcribed ‘in the moment’ and immediately performed to the group as poetry. Themes emerging from analysis of the conversation are also presented as poetry.

Results

Midwifery students, moving between university and practice, emphasised the importance of close connections between these spaces and the role models in them, for learning. External constraints generated a sense of fear and

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stress that was seen to limit midwives' ability to properly support the needs of 'their woman'.

Conclusions

The notion of 'spaces' is important in maternity care and developing education for future midwives. Poetry is a useful multidimensional tool in research. (Author)

2023-01604

Students as researchers: An example of high-level participation of undergraduate midwifery students as

co-investigators in research. Kuipers YJ, Verschuren S (2023), *Women and Birth: Journal of the Australian College of Midwives* vol 36, no 2, March 2023, pp 171-176

Background

There is a shift in focus of the curricula of undergraduate midwifery research-education - from research content to the research process, and the student from being an observer to a participant.

Aim and Methods

To explore an example of how to involve midwifery students as co-investigators in research. This paper discusses the experiences of an educational research project that adopted the highest level of student autonomy in research, involving six Bachelor of Midwifery final-year students participating as co-investigators in qualitative research focusing on women's lived experiences of traumatic childbirth. The experiences are supported by the parameters of research-education and learning, and are discussed in the context of the dimensions of framing undergraduate research: Motivation, Inclusivity, Content, Originality, Setting, Collaboration, Focus and Audience

Discussion

Crucial for this educational research project is the recognition of the motivation, interests, (experiential) knowledge and real-world experiences of students. It starts with listening to the questions, thoughts and ideas that students bring, recognising and respecting the content and importance of their work and what is important and meaningful to them, while facilitating a student-led learning process. Collaboration between students and students and supervisors needs to be formally facilitated and supported, as this contributes to qualitative products for curricular and extra-curricular products. An academic infrastructure is necessary to support extra-curricular activities.

Conclusion

To embed research adequately and effectively in the curriculum, a pedagogical approach, institutional learning and student-centred teaching strategies and practices, including high impact practices to mainstream undergraduate research and enquiry, are crucial. (Author)

Full URL: <https://doi.org/10.1016/j.wombi.2022.11.004>

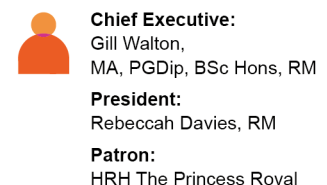
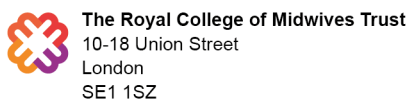
2023-01603

Perinatal mental healthcare: Developing skills in midwifery students. Fox D, Solanki K, Brown G, et al (2023), *Women and Birth: Journal of the Australian College of Midwives* vol 36, no 2, March 2023, pp 167-170

Midwives have a pivotal role in screening for risk factors for mental illness and psychosocial vulnerabilities in women during the perinatal period. They also have a key responsibility to provide women with the appropriate resources to support their mental wellbeing. Midwives can lack confidence and/or feelings of competence regarding these skills. Care of women in the context of their perinatal mental health is a core midwifery skill that deserves practical learning during pre-registration education, just as the more 'hands on' skills such as abdominal palpation, labour and birth support or newborn examination. However, there is limited opportunity for students to gain clinical placement experiences that are specific to perinatal mental health (PMH).

This discussion paper describes an innovative teaching and learning project that aimed to improve confidence in students' ability to conduct screening, support, and referral of women experiencing mental ill health. The project involved the development of an Objective Structured Clinical Examination (OSCE) and audio visual resources to support learning and teaching and clinical placement. Feedback was collected to inform the refinement of the first OSCE, and to assist in the design of the audio visual resources that are now displayed publicly on the Australian College of Midwives website at

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2023-01602

Examining the transformation of midwifery education in Australia to inform future directions: An integrative review.

McKellar L, Graham K, Sheehan A, et al (2023), *Women and Birth: Journal of the Australian College of Midwives* vol 36, no 2, March 2023, pp 155-166

Background

Integral to quality midwifery practice is the education of midwives. Like other countries, Australia faces ongoing challenges in delivering midwifery education programs. Reasons include escalating program costs, challenges in securing meaningful clinical experiences, subsumption of midwifery with nursing, and associated loss of identity in some institutions.

Aim

To critically examine the literature exploring the historical and current drivers, supports and impediments for entry-to-practice midwifery programs to identify strategies to strengthen midwifery education in Australia.

Methods

A structured integrative literature review using Whittemore and Knaf'l's five-stage framework was undertaken; 1) problem identification, 2) literature search, 3) data evaluation, 4) data analysis, and 5) presentation of results.

Findings

The literature search identified 50 articles for inclusion. The thematic analysis identified four key themes: i. a commitment to educational reform, ii. building a midwifery workforce, iii. quality maternity care through midwifery education, and iv. progressing excellence in midwifery education.

Discussion

Extensive literature describes the evolution of midwifery education in Australia over the last 30 years. Through collaboration and amidst opposition, quality midwifery education has been established in Australia. Identification of midwifery as a distinct profession and transformative leadership have been integral to this evolution and must be grown and sustained to prevent a decline in standards or quality.

Conclusion

There is a need to address priorities in midwifery education and for the evaluation of midwifery programs and pedagogy. The provision and maintenance of quality education and practice require shared responsibility between education providers and health care services. (Author)

Full URL: <https://doi.org/10.1016/j.wombi.2022.11.010>

2023-01601

Agency in change: Learning experiences of international midwifery students in South Australia. Eden A, Cominos N, Fleet JA (2023), *Women and Birth: Journal of the Australian College of Midwives* vol 36, no 2, March 2023, pp 143-150

Problem

While literature reports broadly on the experiences of international students of health professions in higher education, the experience of students undertaking an undergraduate midwifery program outside their country of origin has not previously been reported.

Background

Midwifery studies incorporate distinct clinical practice and discipline-specific therapeutic relationships which can challenge students familiar with the health system, so it is necessary to understand their impact on the learning needs of international students, who contribute to the diversity of our workforce.

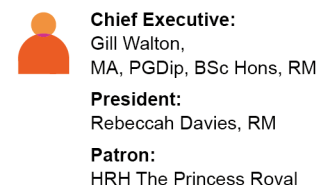
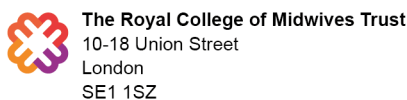
Aim

To explore learning experiences of international students of an undergraduate midwifery program to identify their perceptions and personal strategies which impacted their participation in the program.

Methods

A qualitative descriptive study, with a purposive sample of nine current international students and recent graduates of

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a midwifery program at a South Australian university. Participants attended a focus group or individual phone interview to explore their learning experiences, and data were thematically analysed.

Findings

Five themes and sub-themes were identified, built around a core concept of the international midwifery student experience as agency in change: language and culture, teaching and learning, isolation and integration, services and support, and motivation and resilience. Studying abroad was associated with personal and professional growth. Continuity of care for women presented challenges and produced learnings unique to this cohort.

Conclusion

Tailored support, such as specialized clinical facilitation and organized peer networking, is required for international midwifery students in Australia. Additionally, effective approaches to facilitate bilingualism to support language concordant care are needed. (Author)

2023-01572

Learning through relationships: The transformative learning experience of midwifery continuity of care for students:

A qualitative study. Hainsworth N, Cummins A, Newnham E, et al (2023), *Women and Birth: Journal of the Australian College of Midwives* vol 36, no 4, July 2023, pp 385-392

Background

Midwifery curricula in Australia incorporate 'Continuity of care experiences' (CoCE) as an educational strategy based on an assumption that midwifery students will learn skills and knowledge about woman-centred care that they may not learn in the typical fragmented care system. However, exactly what skills and knowledge they are expected to 'learn' and how these can be assessed have never been specifically identified.

Aim

To explore midwifery students' continuity of care learning experiences within pre-registration midwifery education.

Methods

Focus groups were conducted with first, second and third year Bachelor of Midwifery students (n = 12), who were undertaking CoCE in rural and regional tertiary hospitals in NSW, Australia.

Findings

The overarching theme, 'Learning through relationships', was made up of three interrelated themes: Meeting women and making connections, Being known, and Understanding holistic care.

Discussion

The findings from this study contribute to understanding the educational effects of CoCE. The CoCE relationship provided safety and freedom to learn which was seen as foundational for midwifery students' vision of their future practice and can be seen as a self-determined transformational approach to learning.

Conclusion

This study adds insight into midwifery students' experience of CoCE, and demonstrates that transformative learning occurs through developing a relationship with both the woman and the midwife. For midwifery to develop as a profession and maintain its focus on woman-centredness, it is important that this aspect of midwifery education remains embedded within midwifery program philosophies and learning outcomes. (Author)

2023-01287

Managing costs on placement. O'Connell R (2023), *World of Irish Nursing & Midwifery* vol 30, no 10, Dec22/Jan23 2023, p 45

Nursing and midwifery students have more than just living and education expenses to think about. (Author)

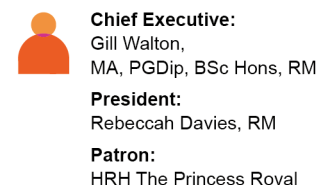
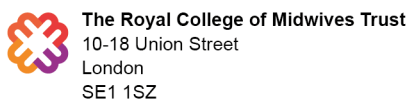
Full URL: https://inmo.ie/World_of_Irish_Nursing

2023-01285

Hope springs maternal. Hughes F (2023), *World of Irish Nursing & Midwifery* vol 30, no 10, Dec22/Jan23 2023, pp 22-23

Freda Hughes spoke to a recently qualified midwife and a student midwife about the student experience and their hopes for the future. (Author)

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2023-01252

Inactivated COVID-19 vaccine hesitancy among midwifery students: a prospective online survey. Turan A, Kaya C, Gençtürk N (2022), Journal of Obstetrics and Gynaecology 14 December 2022, online

Limited information on vaccines' reliability and lack of sufficient scientific data may cause suspicion among individuals concerning the Coronavirus Disease-2019 (COVID-19) vaccines. This study aimed to investigate the attitudes of midwifery students to an inactivated COVID-19 vaccine. This prospective online survey was conducted between 01 March and 01 May 2021 with 172 midwifery students. An anonymous online survey was developed by the researchers, taking into account the studies in the literature examining the attitudes of individuals towards the vaccine. The online survey included a total of 19 questions, covering five main topics. The study revealed that 118 (68%) of 172 midwifery students were hesitant to get vaccinated. There was a significant difference between the vaccine-hesitant and -accepting groups regarding the general attitude towards the vaccine (respectively; <0.001, 0.001). It was determined that 48.1% of the vaccine-accepting participants strongly agreed that this vaccination should be mandatory for all midwifery students working in a clinical practice internship. Higher vaccination willingness levels are expected in students who attend health curricula due to the high literacy level in health-related issues. In conclusion, healthcare professionals who are in contact with patients should be informed more accurately about newly developed vaccines.

IMPACT STATEMENT

What is already known on this subject? Limited information on vaccines' reliability and lack of sufficient scientific data caused suspicion about the COVID-19 vaccines among many people .

What do the results of this study add? Almost half of the participants in both groups agreed that the vaccine could be ineffective if the virus is mutated. Nearly half of the hesitant group thought that the COVID-19 vaccine might not be effective and were concerned about serious side effects.

What are the implications of these findings for clinical practice and/or further research? This study reveals that healthcare professionals who are in contact with patients should be informed more accurately about newly developed vaccines. (Author)

2023-01211

Psychosocial interprofessional perinatal education: Design and evaluation of an interprofessional learning experience to improve students' collaboration skills in perinatal mental health. Keedle H, Stulz V, Conti J, et al (2023), Women and Birth: Journal of the Australian College of Midwives vol 36, no 4, July 2023, pp e379-e387

Background

Perinatal mental health disorders are one of the leading causes of maternal illness and suffering and care and services need to be well coordinated by an interprofessional team who are skilled in working collaboratively.

Aim

The aim of this paper is to describe the design and evaluation of an innovative interprofessional education initiative to increase midwives and other health professional students' knowledge and skills in caring collaboratively for women with psychosocial issues in the perinatal period, including women experiencing domestic and family violence.

Methods

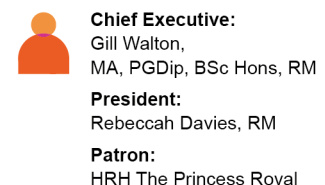
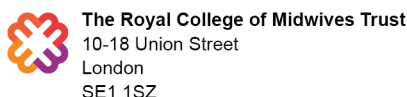
The Psychosocial Interprofessional Perinatal Education workshop was designed for midwifery, psychology, social work and medical students. It provided a simulated learning experience with case studies based on real life situations.

Students undertook pre and post surveys to measure changes in students' perceptions of interprofessional collaboration and their experiences of participating in the interprofessional simulation-based learning activity.

Quantitative survey data were analysed using paired t-tests and a qualitative content analysis was undertaken on the open-ended questions in the survey.

Findings

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Comparison of pre and post surveys found students from all disciplines reported feeling more confident working interprofessionally following the workshop. The following categories were generated from analysis of the open ended survey data: Greater understanding of each others' roles; Recognising benefits of interprofessional collaboration; Building on sense of professional identity; Respecting each other and creating a level playing field; and Filling a pedagogical gap.

Conclusion

Through this innovative, simulated interprofessional education workshop students developed skills essential for future collaborative practice to support women and families experiencing psychosocial distress. (Author)

Full URL: <https://doi.org/10.1016/j.wombi.2023.01.001>

2023-01206

Upskilling nursing students in Nepal: Evaluation of an online education module for promoting respectful maternity care. Dhakal P, Newnham E, Creedy EDK, et al (2023), Midwifery vol 117, February 2023, 103576

Objective

To explore Nepalese nursing student...s evaluation of an online education module on respectful maternity care.

Design

Cross-sectional study.

Setting

A medical college in Chitwan, Nepal.

Participants

Forty third-year undergraduate nursing students.

Methods

Over a three-week time frame, students undertook three, two-hour online education sessions about respectful maternity care. Students were then invited to complete a purposely designed evaluation survey with 13 Likert-scale and yes/no items, and eight open-ended questions about the quality, relevance, impact, and areas for improvement of the education module. Responses were analysed using descriptive statistics and qualitative thematic analysis.

Findings

Students considered the education module to be useful and informative about respectful maternity care. More than half (60%) of the students agreed that the online delivery was more convenient than face-to-face, and learning was equivalent to a traditional class (87.5%). Most students (92.5%) reported that respectful maternity care is not explicitly covered in their degree. Students recommended that respectful maternity care be included in the curriculum and similar education offered to staff and women. Three themes from open-ended questions revealed: 1) empowerment through respectful maternity care; 2) motivation to initiate change; and 3) becoming a respectful clinician.

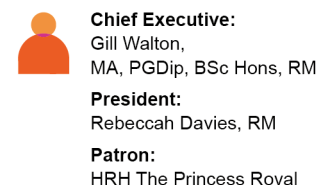
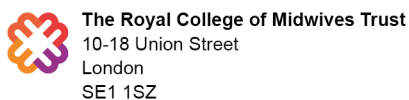
Key conclusions and implications for practice

Respect is essential in all areas of maternity care for improved experiences and outcomes for women and babies. Participants considered that the brief intervention improved their understanding of respectful maternity care and were inspired to implement change in their own practice to be more respectful to women. Curricula in all Nepalese institutions that offer preregistration education should customarily include respectful maternity care. Further research about respectful maternity care from the standpoint of women, educators, students, and maternity care providers in Nepal is required. (Author)

2023-01198

Nurturing our new midwives: A qualitative enquiry of mentor's experiences of supporting new graduate midwives

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working in continuity of care models. Hopkinson D, Gray M, George K, et al (2023), *Women and Birth: Journal of the Australian College of Midwives* vol 36, no 4, July 2023, pp 357-366

Problem

Limited opportunity exists for new graduates in Australia to be employed in continuity of care midwifery models.

Aim

To explore the perspectives of midwifery mentors supporting new graduate midwives employed in continuity of care models.

Methods

An interpretive, qualitative study was conducted. Semi-structured interviews and focus groups with senior midwifery staff who mentored new graduate midwives during their transition to practice within a continuity of care model were undertaken. Digitally recorded and transcribed verbatim, data were thematically analysed. Data collection ceased once theoretical saturation had been achieved. NVIVO software was used to assist with coding and data management.

Findings

Twelve mentors participated. Mentors provided valuable feedback to optimise the supportive mechanisms to enable the success of the rotation of new graduate midwives in continuity of care models during their transition to practice period. Three key themes were constructed, including: Getting it right in the first place; Nurturing our new midwives; and The cultural void.

Discussion

Consistent with the wider literature, effective implementation, sound support structures and wider acceptance of new graduate midwives transitioning to practice within continuity of care models is crucial to its success and sustainability.

Conclusion

Mentors are responsible to nurture, respect and guide new midwives through this crucial period, as they transition from midwifery student to registered midwife. Mentors believe in the transition of new graduate midwives in continuity of care models. (Author)

2023-01186

Midwifery Students' Traumatic Childbirth Experiences, Traumatic Childbirth Perceptions, and Levels of Fear of Childbirth. Sezer NY, Aker MN, Öz B, et al (2023), *Journal of Midwifery & Women's Health* vol 68, no 2, March/April 2023, pp 248-254

Introduction

Although childbirth is generally seen as a positive phenomenon, negative childbirth events can be experienced as well. Midwifery students are at risk of encountering traumatic events throughout their education. The primary aim of this research was to reveal midwifery students' experiences of witnessing traumatic events at childbirth. The secondary aim was to determine the effects of traumatic childbirth experiences witnessed by midwifery students on their traumatic childbirth perceptions and levels of fear of childbirth.

Methods

This cross-sectional study was conducted between January 1 and June 30, 2021. The study sample consisted of 517 midwifery students in Turkey. Data were collected using a descriptive information form, the Traumatic Childbirth Perception Scale (TCPS), and the Visual Analog Scale (VAS) for measuring fear of childbirth.

Results

The majority (88%) of students witnessed a traumatic event at childbirth. The mean (SD) TCPS score was 59.7 (26.1), and the level of fear of childbirth measured with VAS was 5.1 (2.7). A moderate positive correlation was found between the VAS score and TCPS scores ($r = .63$; $P < .001$). Although the mean TCPS scores of students who witnessed a traumatic event were not significantly different from those who did not, their mean VAS score was higher than those who did not ($P = .001$). Among students who experiences traumatic events at childbirth, 35.8% stated that the traumatic events negatively affected their education, and 65.6% reported that they thought it would negatively affect their future professional life.

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Discussion

Witnessing traumatic events at childbirth is associated with increased perception of childbirth as traumatic and fear of childbirth in midwifery students. Traumatic experiences can affect midwifery students' educational and professional lives. Educators in the field of midwifery should support students in coping with traumas. (Author)

Full URL: <https://doi.org/10.1111/jmwh.13464>

2023-01072

Effect of therapeutic touch on daytime sleepiness, stress and fatigue among students of nursing and midwifery: A randomized sham-controlled trial. Vural Doğru B, Utli H, Şenuzun Aykar F, et al (2021), *Complementary Therapies in Clinical Practice* vol 43, May 2021, 101322

Objectives

This study was conducted to assess the effect of therapeutic touch on stress, daytime sleepiness, sleep quality and fatigue among students of nursing and midwifery.

Methods

96 students were randomized into three groups: the therapeutic touch (TT) group, the sham therapeutic touch (STT) group, and the control group. In this randomized sham-controlled study, the TT group was subjected to therapeutic touch twice a week for four weeks with each session lasting 20 min.

Results

When the TT group was compared to the STT and control groups following the intervention, the decrease in the levels of stress ($p < 0.001$), fatigue ($p < 0.001$) and daytime sleepiness ($p < 0.001$), and the increase in the sleep quality ($p < 0.001$) were found to be significant.

Conclusion

It was found that TT, which is one form of complementary therapy, was relatively effective in decreasing the levels of stress, fatigue and daytime sleepiness, and in increasing the sleep quality of university students of nursing and midwifery. (Author)

2023-00937

Midwives: Training [written answer]. House of Commons (2023), Hansard Written question 133802, 26 January 2023

Will Quince responds to a written question asked by Kieran Mullan to the Secretary of State for Health and Social Care, regarding how many people applied for undergraduate pre-registration midwifery courses in each year since 2015.

(AS)

Full URL: <https://questions-statements.parliament.uk/written-questions/detail/2023-01-26/133802>

2023-00916

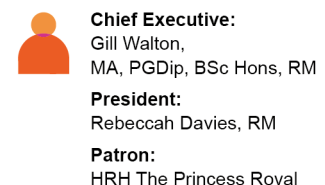
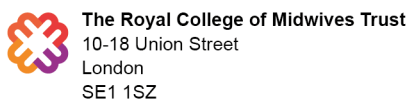
Critical thinking development in undergraduate midwifery students: an Australian validation study using Rasch analysis. Carter AG, Müller A, Gray M, et al (2022), *BMC Pregnancy and Childbirth* vol 22, no 972, December 2022

Background

Well-developed critical thinking skills are required to provide midwifery care that is safe, evidence-based, and woman-centred. A valid, reliable tool to measure is required the application of critical thinking in midwifery practice. The Carter Assessment of Critical Thinking in Midwifery (CACTiM) has previously been psychometrically assessed using classical methods at a single site. This study aims to further evaluate the properties of CACTiM tools using Rasch analysis in a diverse group of midwifery students and preceptors.

Methods

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The CACTiM tools were completed by undergraduate midwifery students studying at three Australian universities and their preceptors. Midwifery students' critical thinking was evaluated separately through student self-assessment and preceptor assessment and then matched. Rasch analysis was used to evaluate the validity of the tools.

Results

Rasch analysis confirmed both the preceptor and student CACTiM tools demonstrated good reliability and unidimensionality. The items can differentiate between students' ability to apply critical thinking in midwifery practice. Person reliability and item reliability were above .92 for both scales indicating excellent reliability and internal consistency. Several improvements were identified to the tools, including enhanced wording to some items, and reduction to a 5-point Likert scale. Through analysis of lower-scoring items, midwifery programs can identify curricula enhancements.

Conclusion

The CACTiM student and preceptor tools are valid and reliable measures of critical thinking in midwifery practice. The tools can assess students' critical thinking abilities and identify areas for development for individuals and across student cohorts through curricula enhancements. (Author)

Full URL: <https://doi.org/10.1186/s12884-022-05303-9>

2023-00911

Birth outside the guidelines: a qualitative study of student midwives' experiences. Morris K (2023), British Journal of Midwifery vol 31, no 1, January 2023

Background

Choice in childbirth is not a new concept, yet it has been suggested that few service-users have a genuine choice about birth. Existing research has explored midwives' experiences of caring for service users birthing outside guidelines, but nothing is known about student midwives' experiences. This study's aim was to explore student midwives' experiences of caring for women giving birth outside the guidelines.

Methods

A generic qualitative approach was used, and purposive sampling recruited five student midwives from a university in east England. Data were collected using semi-structured interviews and analysed thematically.

Results

The three themes were 'contradictions', focusing on the incongruity identified in the narratives, 'the actions of clinicians' illustrated by clinician behaviour witnessed by the participants and 'punishment and judgement', which outlines the treatment of service users who gave birth outside the guidelines.

Conclusions

Students can be exposed to inapt clinicians' behaviours, with the failure to protect and advocate for service users leaving them feeling anxious and potentially burnt out. Midwives should act as role models, so future midwives are aware this behaviour is not conducive to person-led care. (Author)

2023-00910

Coaching can support you in 2023. Benedetti M (2023), British Journal of Midwifery vol 31, no 1, January 2023

Maria Benedetti relates her personal experiences of coaching and encourages midwives to seek out opportunities for coaching in the new year. (Author)

2023-00681

Midwives and Nurses: Training [written answer]. House of Commons (2023), Hansard Written question 126878, 18 January 2023

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Will Quince responds to a written question asked by Dr Kieran Mullan to the Secretary of State for Health and Social Care, regarding how many students applied for (a) nursing and (b) midwifery undergraduate courses in the latest period for which data is available. (AS)

Full URL: <https://questions-statements.parliament.uk/written-questions/detail/2023-01-18/126878>

2023-00559

The Role of Practice Development Midwives In Norfolk & Waveney's Local Maternity System – Part 2: Developing a Blended Learning Platform for Saving Babies Lives Training Across a LMNS. Noble P, Haskey M, Weatherill C (2022), The Practising Midwife vol 25, no 11, December 2022, pp 32-34

The Local Maternity and Neonatal Systems (LMNS) were first formed as early as 2016, yet each system is organised and run differently. This mini-series focuses on the roles of Norfolk and Waveney LMNS's Practice Development Midwives (PDM), exploring differing development projects and the impact they have had across their region. For this episode, development of a Blended Learning Maternity Education package; a Responsive approach to a dynamic climate for interprofessional education will be discussed. (Author)

2023-00555

Human Rights in Childbearing 4. Supporting Autistic Midwives in the Workplace. Henry K (2022), The Practising Midwife vol 25, no 11, December 2022, pp 14-17

As an autistic midwife I am often asked for advice to support autistic women accessing maternity care. Recently my advice was sought for an autistic midwife. This experience was a turning point for reflection on my own experiences of once being an autistic student and my current role of practising midwife.

This led me to consider the experiences of autistic workers and the ensuing discrimination and bullying that can occur, and how my experiences evidenced the need for midwives to be aware of their own and others' human rights. I also researched the support available for NHS midwives and offer ideas for compassionate reasonable adjustments. (Author)

2023-00546

Preceptorship and Internship Series – an Introduction. Henry L, Bennett B (2022), The Student Midwife vol 5, no 4, October 2022, pp 22-24

A commentary from two qualified midwives regarding the preceptorship and internship in UK. (AS)

2023-00544

How Does Witnessing a Postpartum Haemorrhage Affect Partners' Emotional and Psychological Wellbeing? Chard H (2022), The Student Midwife vol 5, no 4, October 2022, pp 15-18


Midwives, students, and birth workers often focus primarily on the health and wellbeing of the woman or birthing person (BP) and baby. It is easy to lose sight of their partner immediately postpartum, particularly in the event of an obstetric emergency. In this article, Hazel Chard evaluates the experiences and effects on partners witnessing a postpartum haemorrhage (PPH). (Author)

2023-00543


Supporting Birth Partners for Better Perinatal Outcomes. Richards K (2022), The Student Midwife vol 5, no 4, October 2022, pp 11-14

The way in which maternity staff speak to and treat the women and birthing people in their care is pivotal to strengthening maternity services and improving outcomes for all families. This is true of birth partners too. Yes, the woman or birthing person is paramount and the focus of care, but the person sat by their side is not only witness to the whole experience – they also play a significant role in the labour journey and the transition to parenthood. They

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are often the person who 'fills in the blanks' after pain, tiredness or focus has overwhelmed their loved one. (Author)

2023-00483

Nursing students experiences in neonatal care: A qualitative study. Barreira C, Rodrigues I, Loureiro F (2023), Journal of Neonatal Nursing vol 29, no 3, June 2023, pp 559-562

Clinical practice is a moment of stress for nursing students with impact in academic outcomes. Neonatal Intensive Care Units (NICU) are a specific and multifaceted context that offer complex experiences to nursing students. A descriptive, cross-sectional, and observational study, with a qualitative approach was outlined that aimed to describe and categorize the experiences of nursing students in NICU. Semi structured interviews were used for data collection and content analysis for data analysis. Among eligible students (those that had performed clinical practice in NICU and agreed to participate) a purposive sample of 6 students was selected. Data analysis allowed the identification of five categories: clinical practice evolution, expectations about clinical practice, challenges faced in clinical practice, feelings for the babies and their parents, and comparing with the adult nursing clinical practice. The findings of this study indicate that nursing students experienced a wide range of feelings and experiences. (Author)

Full URL: <https://doi.org/10.1016/j.inn.2022.11.007>

2022-11093

A day at the vigil. Mogg B, Stimpson K (2021), Midwifery Matters no 171, Winter 2021, pp 12-13

Student midwives Becky Mogg and Katie Stimpson marched with midwives. (Author)

2022-11077

Childcare: Students [written answer]. House of Commons (2022), Hansard Written question 104182, 6 December 2022

Claire Coutinho responds to a written question from Grahame Morris to the Secretary of State for Education, regarding whether she will extend the 30 hours free childcare provision to student (a) midwives, (b) nurses and (c) paramedics.

(MB)

Full URL: <https://questions-statements.parliament.uk/written-questions/detail/2022-12-06/104182>

2022-11075

Health Professions: Childcare [written answer]. House of Commons (2022), Hansard Written question 104183, 6 December 2022

Will Quince responds to a written question from Grahame Morris to the Secretary of State for Health and Social Care, regarding whether he will have discussions with the Secretary of State for Education on the potential merits of extending the 30 hours free childcare provision to include (a) student midwives, (b) nurses and (c) paramedics to help remove barriers for those seeking a career in the NHS. (MB)

Full URL: <https://questions-statements.parliament.uk/written-questions/detail/2022-12-06/104183>

2022-11070

Does a student midwife's personal experience of childbirth affect their philosophy of care and the choices they offer to women? A qualitative study. Milnes S (2022), MIDIRS Midwifery Digest vol 32, no 4, December 2022, pp 460-465

Background to the study

It is estimated that one in four women experiences birth trauma and this, if unresolved, can lead to irrational, unconscious flashbacks when exposed to an associated situation. Mature student midwives often attribute their own birth experiences as a catalyst to commence their midwifery studies, however, little is known about how this experience can affect them in clinical placement.

Aims of the research

To examine student midwives' personal experiences of birth, their perceptions about birth and how these may influence their clinical practice.

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Methodology

A qualitative phenomenological approach was adopted and a purposive sample of 10 student midwives was interviewed using a semi-structured method. The transcripts were coded and thematic analysis used to search for themes.

Ethical approval

Granted by the university ethics committee.

Findings

Three themes were generated from the data: quality of care; the medicalisation of childbirth; and the road to redemption. It was apparent that all students believed in a physiological philosophy of care, associating good-quality care with perceived control, communication and compassion. However, this was not what they witnessed in clinical practice. The majority of students reported experiencing unexpected flashbacks of their own experience during their clinical placement. Students who had not experienced a subsequent redemptive birth found these flashbacks distressing and felt this affected their clinical judgment.

Conclusions

More research is needed to explore whether student midwives would benefit from counselling prior to their first clinical placement to examine and debrief their own experience, reducing attrition by managing expectations. Including such a session in the existing midwifery curricula is also recommended. (Author)

2022-11069

'Ensuring every voice is heard': promoting inclusivity in midwifery education. Lucas G, Nutt C, Mann F, et al (2022), MIDIRS Midwifery Digest vol 32, no 4, December 2022, pp 416-422

This article is a jointly written paper, exploring inclusivity in midwifery education, within a higher education institute at the University of the West of England (UWE). The paper is informed by the perspectives of midwifery educators, advocacy groups, service users and student midwives who support the work of the service user group, so that every voice is heard. (Author)

2022-11066

Action Learning Sets (ALS) with student midwives. Kirtley N (2022), MIDIRS Midwifery Digest vol 32, no 4, December 2022, pp 427-432

Background

Attrition within health care programmes is a long-standing concern. One of the key reasons documented is an unsupportive clinical learning environment, which includes having minimal opportunities for students to reflect, gain peer support and learn in action (Papastavrou et al 2016).

Aim

The primary focus of this quality improvement project (pilot) was to identify whether action learning sets (ALS) would be a valuable learning development tool for student midwives. ALS, alongside innovative pedagogical practices within the clinical area, are reported to support effective student learning. The quality of the education provided through ALS, and the process of undertaking ALS, were also considered with the expectation that these would increase the students' experience, enhance maternity care provision and increase women's experience. In addition, it was felt that the process would strengthen the links between practice partners and higher education institutions (HEIs).

Participants

ALS were facilitated for five third-year student midwives in their final placement of the programme.

Methods

The Model for Improvement framework (Public Health Wales (PHW) 2019) was used, including Plan-Do-Study-Act (PDSA) cycles to test and develop the organisation and delivery of ALS. Qualitative data were gathered via a questionnaire post-delivery of the ALS to evaluate students' experiences. The response rate was 100% (n=5). A hybrid process of inductive and deductive thematic analysis was used to analyse the data, resulting in five themes. Following this, the CIPP (content, input, process and product) model was used to evaluate the effectiveness of the implementation of the action learning sets (Stuffelbeam & Zhang 2017). Results: Prior to the ALS, student midwives

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had identified the need for more meaningful, structured reflective discussions where practice experiences could be developed alongside peer support. Post-ALS students indicated overwhelmingly a positive result, reporting that ALS would be a beneficial addition to the curriculum.

Conclusion

The development of a range of learning practices to suit student midwives is needed. ALS have been shown to be an exciting, innovative learning tool which supports learners in a variety of environments. It is effective in sustaining student midwife satisfaction and reduced rates of attrition. Using reflection, peer support and action learning to improve knowledge from clinical experiences will, in turn, enable student midwives to provide optimum, safe care to women, babies and their families. (Author)

2022-10967

Blog: NMC standards: a holistic approach to nursing care. Holt PJ, Dixon J (2022), Nursing and Midwifery Council (NMC) 6 December 2022

As nurses, we're all guided by the NMC's standards of proficiency every day. But how do the standards come to be? Why are they the way they are, and what's your say in them? (Author)

Full URL: <https://www.nmc.org.uk/news/news-and-updates/nmc-standards-a-holistic-approach-to-nursing-care/>

2022-10801

Neonatal infection. The Royal College of Midwives (2022), World of Irish Nursing & Midwifery vol 30, no 9, November 2022, p 41

NEONATAL infection is a significant cause of mortality and morbidity in newborn babies and accounts for 10% of all neonatal mortality. Infection can lead to life-threatening sepsis. Without quick treatment, sepsis can lead to serious complications including organ failure and potential risk of death. (Author)

Full URL: https://inmo.ie/World_of_Irish_Nursing

2022-10785

INMO calls for additional publicly funded nursing and midwifery college places. Anon (2022), World of Irish Nursing & Midwifery vol 30, no 8, October 2022, p 9

RESPONDING to a government-commissioned report that states that the intake of nursing students will have to double in the higher education

system in the next 20 years, the INMO has long called for additional publicly funded and provided college places.

(Author)

Full URL: https://inmo.ie/World_of_Irish_Nursing

2022-10624

Finding The Future Midwife: How the Revised Standards of Proficiencies for Midwives Support Pre-Registration Midwifery Programme Admissions Processes. Meegan S (2022), The Practising Midwife vol 25, no 10, November 2022, pp 8-13

Pre-registration midwifery education programmes are quietly undergoing a revolution. In 2019, the Nursing and Midwifery Council (NMC) published an ambitious set of proficiencies for the future midwife, defining a framework of skills, knowledge and behaviours that midwives are required to demonstrate at the point of qualification and subsequent entry to the register.¹ The revised Proficiencies for Midwives were required to reflect the demands of contemporary maternity services and were based on the framework produced by Renfrew et al. within the Lancet midwifery series. (Author)

2022-10611

Continuity or team-teaching approach for midwifery education? An exploratory qualitative study of student and academic preferences. Kuliukas L, Brown J, Bosco A, et al (2023), Women and Birth: Journal of the Australian College of Midwives vol 36, no 2, March 2023, pp 177-183

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Background

The content of midwifery courses is very similar across universities. The teaching approach is not, with universities adopting a variety of pedagogical methods.

Aim

To explore views of midwifery students, midwifery academics and senior academic managers comparing a continuity approach where one main academic provides the majority of midwifery content plus pastoral care compared with a team-teaching approach of midwifery education where lecturers change throughout the course.

Methods

Semi-structured interviews and focus groups were used to discover thoughts, benefits and disadvantages of two teaching approaches. Data were analysed using thematic analysis.

Findings

Midwifery students and academics valued relationship building, consistency of advice and assessment expectations of the continuity approach but also appreciated a variety of teaching styles and content found in the team-teaching approach. Senior academic managers favoured a team-teaching approach due to workload concerns.

Discussion

Continuity and team-teaching pedagogical approaches offer different advantages. Continuity in midwifery education may provide students with a meaningful trusting relationship with their teacher and consistency of information, which could aid learning. A team-teaching approach provides students with diversity of teaching styles and midwifery 'stories'. A combination of both pedagogies offering both a mix of teachers and a named 'go-to' mentor might help meet student requirements for both continuity and variety.

Conclusion

Relationship building, consistency and trust, were all evident in the continuity approach whereas the team-teaching approach was considered to be a more sustainable workload model. (Author)

2022-10356

Medical and midwifery students need increased sexual medicine education to overcome barriers hindering bringing up sexual health issues – A national study of final-year medical and midwifery students in Finland. Manninen SM, Kero K, Riskumäki M, et al (2022), *European Journal of Obstetrics & Gynecology and Reproductive Biology* vol 279, December 2022, pp 112-117

Objectives

Physicians and midwives meet patients with sexual health issues regularly; however, they may have limited sexual medicine education. The study's aim was to evaluate the self-reported competence of medical and midwifery students to bring up sexual health issues with their patients and to assess the barriers that hinder these discussions. The need for additional education was also evaluated.

Study design

A web-based questionnaire was sent to the last-year medical and midwifery students graduating between December 2018 and May 2019 in Finland. In total, 233 medical students and 131 midwifery students participated in the study. Three fields were evaluated: the self-reported competence in discussing sexual health issues and treating patients with these issues, the barriers to bringing up sexual problems, and the need for education in sexual medicine.

Results

The students self-reported better competence in discussing sexual health issues than in treating patients' sexual problems. For the medical students, the most important barriers hindering bringing up sexual health issues were lack of i) time (89.2 %), ii) experience with sexual medicine (88.1 %), and iii) knowledge (82.1 %). For the midwifery students, the most important barriers were i) lack of experience with sexual medicine (73.3 %), ii) fear of failing to respond to patients' sexual health issues (64.9 %), and iii) lack of knowledge (62.5 %). A higher percentage of the midwifery students (96.2 %) reported an interest in sexual medicine education compared to the medical students (55.4 %) (OR 13.89, 95 % CI 5.32–35.71, $P < .001$). Majority (76.5 %) of the medical students and almost half (45.0 %) of the midwifery students reported receiving too little sexual medicine education (OR 7.30, 95 % CI 4.00–13.33, $P < .001$).

Conclusions

Both student groups reported several barriers hindering bringing up sexual health issues with their patients and

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expressed a need for more education, particularly the medical students. (Author)

Full URL: <https://doi.org/10.1016/j.ejogrb.2022.10.021>

2022-09909

Midwives: Training [written answer]. House of Commons (2022), Hansard Written question 62837, 13 October 2022

Will Quince responds to a written question asked by Dan Jarvis to the Secretary of State for Health and Social Care, regarding what plans she has to increase the number of student midwife training places in future years. (AS)

Full URL: <https://questions-statements.parliament.uk/written-questions/detail/2022-10-13/62837>

2022-09847

Implementing midwifery services in public tertiary medical college hospitals in Bangladesh: A longitudinal study.

Anderson R, Williams A, Hoque DE, et al (2023), *Women and Birth: Journal of the Australian College of Midwives* vol 36, no 3, May 2023, pp 299-304

Background

A necessary precursor for quality maternity care provision is high quality education. The quality of care that students are exposed to during clinical education on maternity wards shapes their competencies and professional identities. In this study, we look at the introduction of midwives educated to international standards – with facility mentorship – deployed in tertiary level teaching hospitals in Bangladesh with the intention of improving the use of World Health Organization (WHO)-recommended birth practices.

Aim

To examine the outcomes of introducing midwifery services into tertiary level care facilities in Bangladesh, on the use of WHO-recommended birth practices.

Methods

A retrospective review of patient register data was carried out to understand level of changes in use of WHO-recommended birth practices after the introduction of a midwifery service. Multivariate linear regression was applied using an interrupted time series analysis, with and without a delayed effect, to assess both level and trend change following the introduction of the midwifery service.

Findings

A significant increase ($p < 0.001$) in use of WHO-recommended birth practices was found, both immediately following the midwives' introduction and after one year. Quality improvement was observed not only in births attended by midwives, but also in those attended by doctors and nurses.

Conclusion

By introducing quality maternity care provision through midwives in clinical sites, especially in tertiary-level care hospitals with large numbers of students, international standard midwives can improve the quality of clinical education in maternity wards, a critical priority for maternal health worldwide. (Author)

Full URL: <https://doi.org/10.1016/j.wombi.2022.09.006>

2022-09844

A mixed methods evaluation of Multiple Mini Interviews for entry into the Bachelor of Midwifery. Sheehan A, Thomson

R, Arundell F, et al (2023), *Women and Birth: Journal of the Australian College of Midwives* vol 36, no 2, March 2023, pp 193-204

Background

Multiple-mini interviews (MMI) are increasingly used as part of the admission process into healthcare degrees. Evaluations have found MMIs to be a fair assessment tool in terms of reliability and validity and viewed positively by those involved in the MMI process. The use of MMIs in midwifery is novel and evaluation is lacking.

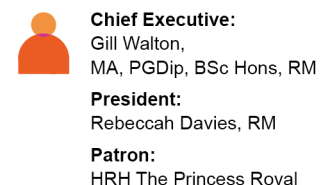
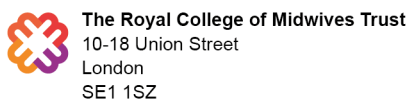
Aim

To evaluate the use of MMIs as part of the admission process for the Bachelor of Midwifery in one Australian university.

Methods

A basic convergent mixed methods study design was utilised. Data included linked data sets, Likert scale responses to

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survey questions, focus groups and open-ended survey questions. Integration took place at the interpretation and reporting stage.

Findings

Participants viewed the MMI experience positively. The study confirmed the reliability of the MMIs as an assessment tool. Most variance in MMI scores was attributed to the candidate at 31.4 % with the interviewer and the interview station having less influence on the MMI score at 11 % and 6.4 % variance. Older applicants on average achieved higher MMI scores, and those who spoke a language other than English at home or were first in family to attend university had lower on average MMI scores. Being born overseas did not impact an applicant's MMI score. The overall experience was seen as fair, offering further opportunity to gain entry into the Bachelor of Midwifery.

Conclusion

MMIs were viewed positively and findings support the use of MMIs as part of an admissions process for the Bachelor of Midwifery. (Author)

2022-09837

A pilot study: Transitioning into a new graduate midwife – perspectives about a unique student-led practice. Stulz VM, Elmir R, Reilly H, et al (2023), Women and Birth: Journal of the Australian College of Midwives vol 36, no 3, May 2023, pp e369-e377

Objective

To explore midwifery students' (and as new graduates') experiences and level of satisfaction about a student-led midwifery model of care.

Methods

This was a qualitative study to elicit rich descriptive data from the participants. Thematic analysis was used. The students were interviewed at the end of their final year of study and they were subsequently interviewed at the end of their graduate year.

Results

Two overarching themes were identified from the qualitative findings from the first and second interviews including the students building and sustaining important relationships and transitioning from a student to new graduate.

Conclusions

The midwifery students valued the opportunity to spend one year in a student-led model of care so that they could build and sustain important relationships with women and their team including the mentor midwife as new graduates. The students developed confidence by being respected by midwives and enabled them to advocate for women. (Author)

2022-09836

'It's no ordinary job': Factors that influence learning and working for midwifery students placed in continuity models of care. Moncrieff G, Martin CH, Norris G, et al (2023), Women and Birth: Journal of the Australian College of Midwives vol 36, no 3, May 2023, pp e328-e334

Background

Maternity policy and guidelines increasingly recommend or stipulate the increased provision of midwifery continuity of carer as a priority model of care. The scale up and sustainability of this model will require that student midwives are competent to provide continuity of carer at the point of qualification. Guidance relating to how to optimally prepare student midwives to work within continuity models is lacking.

Aim

To explore perspectives and experiences of working within and learning from student placement within continuity models of care.

Methods

An online mixed methods survey aimed at midwifery students and qualified midwives with experience of working within or providing education relating to continuity models. Quantitative results were analysed through descriptive statistics while free text responses were brought together in themes.

Findings

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Benefits and challenges to placement within continuity models were identified. These provide recommendations that will enhance learning from and skill development within continuity models of care.

Conclusion

There is a need for continuity of mentorship and strong relationships between education and practice, and the provision of flexible curriculum content around this to enable students to prioritise appointments with women in their care. System level evaluation and support is needed to guide the optimal provision of continuity models, so that they are effective in improving outcomes and experiences. Foregrounding woman centred care as foundational to education and facilitating the critical deconstruction of dominant discourses that conflict with, and may prevent this form of practice, will promote the provision of care that is integral to these models. (Author)

2022-09774

Childcare: Health Professions [written answer]. House of Commons (2022), Hansard Written question 62748, 13 October 2022

Kelly Tolhurst responds to a written question from Mark Pritchard to the Secretary of State for Education, regarding what childcare support the Government provides for (a) student nurses, (b) midwives and (c) paramedics; and what plans he has to increase that level of support. (JSM)

Full URL: <https://questions-statements.parliament.uk/written-questions/detail/2022-10-13/62748>

2022-09455

Midwives: Training [written answer]. House of Commons (2022), Hansard Written question 62838, 13 October 2022

Robert Jenrick responds to a written question asked by Dan Jarvis, Labour, Barnsley Central to the Secretary of State for Health and Social Care, regarding what proportion of the cost of training a student midwife is paid by (a) the student, (b) her Department and (c) other sources.

This answer is the replacement for a previous holding answer. (AS)

Full URL: <https://questions-statements.parliament.uk/written-questions/detail/2022-10-13/62838>

2022-09422

From Da-a-Luz Training to Midwifery Education within the NHS. Anonymous (2022), Midwifery Matters no 174, Autumn 2022, pp 30-31

An anonymous student midwife shares her experiences of feeling unwanted, unsupported and ignored while on placement on a busy and understaffed labour ward. (MB)

2022-09391

Midwifery Training 1994-1997 – a Personal View. Genevieve LRS (2022), Midwifery Matters no 174, Autumn 2022, pp 16-17

The author reflects on midwifery education and the experience of being a student midwife in the 1990s. (MB)

2022-08527

Integrating cultural safety into midwifery education. Esegbona-Adeigbe S (2022), The Practising Midwife vol 25, no 8, September 2022, pp 37-39

Cultural safety is a concept based on being aware of the cultural self and the impact this has on encounters with service users. Lack of cultural safety during clinical practice may create an environment in which racist, discriminatory and stereotypical behaviour becomes the norm. Cultural safety highlights how power inequalities can occur during healthcare interactions and the negative impact this can have on an individual's healthcare experiences. Integration of cultural-safety education during midwifery training and throughout a midwife's career is essential to optimise birthing women and people's pregnancy experiences. (Author)

2022-08526

How can midwives and educators better understand teach and support neurodivergent students?. Edwards E, Rayner S,

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In this article the authors explore the experiences of neurodivergent student midwives, defining neurodiversity and giving a spotlight to neurodivergent voices. In midwifery climate of attrition and with a growing number of neurodivergent students entering higher education, this article makes recommendations about how you can better understand, teach and support neurodivergent students in university and clinical placements to make midwifery education more inclusive and sustainable. (Author)

2022-08507

Implementing collaborative learning in practice in a London maternity ward. Markowski M, Yearley C, Bower H, et al (2022), British Journal of Midwifery vol 30, no 9, September 2022

A collaborative learning in practice pilot study in a maternity unit in a London Trust has been carried out. Collaborative learning in practice is a model for supervising students where they work in small groups under the guidance of a practice supervisor. The pilot found that the model is a possible approach to increasing placement capacity that provides an equally enriching, if not improved, learning experience. Improvements were seen in peer support, confidence and responsibility, teamwork skills, new learning opportunities and being better prepared for practice after graduation. Reflecting on the experience of implementing the first cycle of the pilot, this article provides guidance to healthcare education providers for implementing the model in practice placements. The guidance offers a modified model, establishing key personnel as collaborative learning in practice champions and providing adequate preparation for students, staff and the environment. (Author)

Full URL: <https://doi.org/10.12968/bjom.2022.30.9.532>

2022-08155

Does a student midwife's personal experience of childbirth affect their philosophy of care and the choices they offer to women?. Milnes SE (2022), MIDIRS Midwifery Digest vol 32, no 3, September 2022, pp 320-324

Background: Midwifery degrees are predominantly undertaken by women, many of whom are already mothers. The medical model of childbirth is synonymous with intervention, with birth being viewed as an event waiting to go wrong. The lack of choice and control has contributed to a high level of birth trauma, affecting 25 per cent of women. Trauma can often be unresolved and reoccur unpredictably.

Aim: To discover whether a student midwife's personal experience of birth affects their philosophy of care and the choices they offer to women.

Methods: A search of the literature was undertaken using MIC and CINAHL, two health and midwifery electronic databases. Grey literature was also considered. Themes were then generated for discussion.

Findings: Only five papers were eligible for inclusion and although exploration of students' prior experience was not the initial aim of these studies, this emerged from the findings.

Themes included: 'views on childbirth are shaped by personal experience' and 'the role of the midwife has an impact on care'.

Discussion: Personal experience of birth is a catalyst for commencing midwifery education. These experiences were both positive and negative.

Conclusion: Further research is required to ascertain if a student midwife's perception of birth is altered by their previous experience and whether, as educators, we need to support students to disassociate this from what they see in clinical practice. (Author)

2022-07979

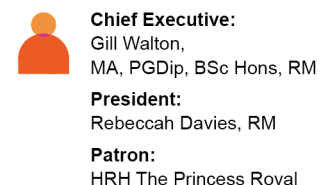
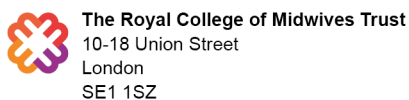
It's time to talk about.. physiological birth. Lawrence R (2021), Midwifery Matters no 169, Summer 2021, p 23

Rhia Lawrence discovers the joys of Kemi Johnson's Clubhouse. (Author)

2022-07483

Blether and bosie. Bucklegray M (2021), Midwifery Matters no 168, Spring 2021, pp 30-31

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2022-07482

First birth: homebirth. Mujahid Z (2021), Midwifery Matters no 168, Spring 2021, p 30

Witnessing homebirth is an essential foundation for students' understanding of physiological birth and awareness of the powerful influence of environment on labouring women.

Student midwife, Zeynab Mujahid, reflects on the unforgettable experience of her first witnessed birth, at home.

(Author)

2022-07481

Transforming student midwives' confidence and knowledge about home birth. Todd S (2021), Midwifery Matters no 168, Spring 2021, pp 28-29

Sam Todd introduces a resource to support student midwives in having meaningful conversations about home birth.

(Author)

2022-06808

My experience of the interactive book about midwifery history. Campbell J (2022), Australian Midwifery News vol 29, Winter 2022, p 56

The author, a first-year midwifery student at Western Sydney University, Australia, describes her experience of using the interactive book about midwifery history, the creation of which is described in this journal (1). 1. Keedle H.

Creating engaging content for midwifery students using the Australian Midwifery History Project Website. Australian Journal of Midwifery, vol 29, Winter 2022, pp 54-55.

2022-06320

Understanding the code. Adeyela O, McGuinness D (2022), British Journal of Midwifery vol 30, no 7, July 2022, pp 412-414

Omobolanle Adeyela, a student midwife, uses Gibbs' reflective cycle to understand the international code of marketing of breastmilk substitutes. (Author)

2022-05120

'The sudden shift' — an evaluation of the attitudes of student midwives to online learning during the COVID-19 pandemic. Lacey N, Thomas G (2022), MIDIRS Midwifery Digest vol 32, no 2, June 2022, pp 172-177

Objective: The objective of this evaluation was to capture student midwives' initial thoughts, feelings and perspectives on the sudden shift to online digital learning in response to the COVID-19 pandemic.

Methods: Student midwives across three cohorts at one university (n=109) were invited to complete an evaluation of the shift to digital learning during the COVID-19 pandemic using an online survey package. The survey included polar questions, multiple-choice questions and free text options.

Results: Student midwives from all three year cohorts responded to the evaluation (n=56) revealing the positive aspects of online learning, which included the ability to continue with their studies during the pandemic, flexibility in learning and saving travel costs. They also highlighted the challenges students have faced: difficulties in staying motivated, missing peers and having adequate access to the technology required for online learning.

Conclusion: Some elements of online learning, including aspects of digital learning that would never have been considered prior to the COVID-19 pandemic, have been successful and have the potential to be fed forward and incorporated into future midwifery education programmes. Students were able to adapt to the modified curriculum

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and new ways of working that the constraints of COVID-19 imposed. Overarchingly students indicated that face-to-face teaching was their preference and that, although they would not choose to learn online full time, they recognised its potential and some of the benefits it offered. (Author)

2022-04587

Making the transition: A focus group study which explores third year student and newly qualified midwives' perceptions and experiences of becoming a registrant midwife. Wier J, Lake K (2022), *Midwifery* vol 111, August 2022, 103377

Objective

To explore the perceptions and experiences of becoming a newly qualified midwifery practitioner.

Design

Focus group methodology.

Setting

South East England.

Participants

8 newly qualified midwives (NMQ's) and 8 third year student midwives participated in the focus groups.

Findings

Some of the participants raised concerns about the emotional challenge of making the transition from senior student to newly qualified midwife, including the impact of their own and others' expectations and the support that was available to them. The participants felt that the process of moving from student midwife to newly qualified midwife presented opportunities and challenges. Whilst the participants had looked or were looking forward to becoming a midwife, they also recognised that this process had the potential to be stressful.

Key Conclusion

Both the newly qualified midwives and senior students who participated in the study identified that having effective support from more senior staff and from peers would enable newly qualified midwives to have increased confidence when providing quality care to pregnant women.

Implications for Practice

Effective support strategies need to be developed in order to support the transition from student to newly qualified midwife. (Author)

Full URL: <https://doi.org/10.1016/j.midw.2022.103377>

2022-04364

The experiences of black, Asian and minority ethnic student midwives at a UK university. Pendleton J, Clews C, Cecile A (2022), *British Journal of Midwifery* vol 30, no 5, May 2022, pp 270-281

Background

Evidence acknowledges inequalities to progression and achievement for black, Asian and minority ethnic students within higher education, as well as barriers for promotion of black, Asian and minority ethnic staff within the NHS. In the UK, legislation and regulatory guidance requires students studying undergraduate midwifery to undertake their programme across both these institutions.

Aims

To understand the experiences of black, Asian and minority ethnic students studying undergraduate midwifery at a UK university.

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Methods

This qualitative study used semi-structured interviews with five student midwives who identified as black, Asian or minority ethnic from a university, conducted by a peer researcher. Thematic analysis was used to analyse anonymised transcript data.

Results

Three key themes were identified: 'invisibility', 'emerging visibility' and 'managing visibility'. Participants experienced a monocultural focus in the curriculum and in practice and were exposed to racist behaviours, causing them to modify behaviours.

Conclusions

A need for diverse teaching materials and cultural inclusivity across institutions was identified to help combat outdated systemic Eurocentric practices and support the implementation of recently published midwifery standards.

(Author)

2022-04026

A complex and demanding situation – Midwifery preceptors and midwifery students' experiences of teaching and learning prevention of severe perineal trauma. Ulfsdottir H, Johnson K, Rubertsson C, et al (2023), Women and Birth: Journal of the Australian College of Midwives vol 36, no 1, February 2023, pp e118-e124

Background

Many high-income countries have seen an increase in severe perineal trauma. Teaching strategies and conditions for learning during the active second stage of labour are scarcely described.

Aim

To describe midwifery preceptors and midwifery students' experiences' of teaching and learning how to manage the second stage of labour, with the specific aim of preventing severe perineal trauma.

Methods

A qualitative study with focus group discussions and individual in depth-interviews with preceptor midwives (n = 23) and student midwives (n = 10). Data were analysed by qualitative content analysis.

Results

"A complex and demanding situation with mutual need for feedback, reflection and safety" was the overall theme describing the conditions. Three sub-themes were identified. "Adapting to a unique situation" refers to the difficulty of teaching and learning the aspects needed to prevent severe perineal trauma, and to provide care during this stage. "Hindering and limiting circumstances" describes teaching strategies that were perceived negatively, and how midwifery students tried to adapt to the preceptors rather than the birthing women. "A trustful and communicative relationship" describes the importance of the relationship between the student and the preceptor, where communication was a central, but not obvious part.

Conclusion

An increased awareness among preceptors is needed to optimize teaching strategies, enabling the students to focus on learning the art of the second stage of labour; supporting the woman, preventing severe perineal trauma and ensuring the safety of the unborn baby. Future research should address how existing prevention models can include training to increase preceptors' confidence in teaching. (Author)

2022-02472

Nursing and Midwifery Students [written answer]. Northern Ireland Assembly (2020), Hansard Written question AQW 12934/17-22, 30 December 2020

The Minister of Health responds to a written question asked by Mr Pat Sheehan regarding whether he will offer final year nursing and midwifery students the opportunity to complete their clinical placements as paid members of staff, as set out in the emergency standards reintroduced by the Nursing and Midwifery Council, in response to the ongoing

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2022-02317

An exploration of the development of resilience in student midwives. Williams J, Hadley J (2022), British Journal of Midwifery vol 30, no 4, April 2022, pp 202-207

Background

Resilience has been considered a key personal characteristic for a healthcare professional to be able to cope with the demands of their profession. There is a paucity of research that has considered resilience in midwifery and none has used a resilience scale over the length of the midwifery programme.

Methods

A resilience scale was used with one cohort of student midwives on five occasions throughout their midwifery programme.

Results

The mean across all of the five scale scores for the 15 participants was 122 (range of mean scores:92–135). The majority of participants (n=13) had average, moderate or moderately high resilience and all student midwives except one increased their resilience between the first and fifth completion of the scale.

Conclusions

The true resilience scale is a useful tool to use in midwifery undergraduate programmes to determine the development of resilience in student midwives. Importantly, the scale could be used at an early opportunity to identify any support needs. (Author)

2022-02196

Social culture and the bullying of midwifery students whilst on clinical placement: A qualitative descriptive exploration. Capper T, Muurlink O, Williamson M (2021), Nurse Education in Practice vol 52, March 2021, 103045

The context within which midwifery students are professionally socialised is thought to impact upon the development of their sense of belongingness, their attitudes and values, and their commitment to the midwifery profession. Negative forms of socialisation are known to lead to undesirable outcomes including desensitisation about humanistic needs. This has potential to extend to an acceptance of workplace bullying and unfair treatment of others, including midwifery students whilst on clinical placement. This study aimed to explore how the social culture of the maternity setting influences midwifery students' experiences of being bullied whilst on clinical placement. One hundred and twenty midwifery students from Australia and the United Kingdom completed a qualitative online survey and the data was thematically analysed. One main overarching theme and four sub themes were identified. These were: 'the organisational culture of acceptance: "in front of"', 'brazen expression', 'group buy-in', 'suppression of dissent', and 'collateral damage'. Each of these factors enabled replication of the problem and led to perpetuation of the bullying cycle. This study illuminated that an entrenched culture of acceptance exists which impacts the students educational experience, the care received by mothers and babies, and the reputation of the midwifery profession. (Author)

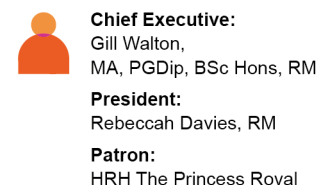
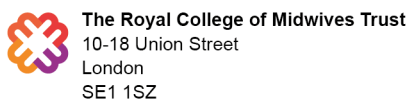
2022-01929

Student midwives' perception of the growth assessment protocol (GAP): Preparation for clinical practice. Lawes R, Jones S (2020), Nurse Education in Practice vol 44, March 2020, 102756

Fetal growth restriction is a major complication of pregnancy and increases the risk of stillbirth. Midwives screen for fetal wellbeing by measuring the symphysis fundal height to detect growth restriction, which can present in a low risk pregnancy or occur late in gestational age. The detection, surveillance and onward referral of these pregnancies are the responsibility of all midwives. To prevent avoidable stillbirth due to restricted fetal growth and to ensure safe,

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evidence based practice, the Perinatal Institute developed the Growth Assessment Protocol (GAP).

A qualitative study using semi-structured interviews was conducted to explore 2nd year student midwives' perception of the GAP training and its impact on their clinical practice. Data was analysed and four main themes were identified using interpretative phenomenological analysis.

The findings from the study show that the participants viewed the GAP training as 'authentic' and commented on the alignment with contemporary practice for the detection and surveillance of at risk pregnancies. The findings suggest that GAP training for pre-registration student midwives has the potential to provide a sustainable workforce, prepared to meet the World Health Organisation's global strategy for eliminating avoidable stillbirth by 2030. (Author)

2022-01928

The experience of student midwives being taught newborn infant physical examination (NIPE) as an extracurricular activity at a university in the UK: A descriptive survey study. Cescutti-Butler LD, Way S (2020), Nurse Education in Practice vol 44, March 2020, 102708

No abstract available.

2022-01919

Midwifery student's perceptions of completing a portfolio of evidence for initial registration: A qualitative exploratory study. Gray M, Downer T, Capper T, et al (2020), Nurse Education in Practice vol 43, February 2020, 102696

The Australian Nursing and Midwifery Accreditation Council (ANMAC) has set regulatory standards, that require midwifery students to verify how they have met ANMAC standard 8.11 requirements prior to registration as a midwife. The most common formats for recording achievement of the ANMAC requirements are paper-based or electronic portfolios. Research was conducted to compare student's experiences of completing their university portfolio format. Focus group interviews were held at two south east Queensland universities. This study has found that there is disparity between universities in the level of detail documenting evidence of midwifery experiences. The paper-based portfolio was criticised for not having sufficient space for the students to explain the extent of their experiences, in contrast students completing the ePortfolio felt their reflective entries were excessive.

Some students felt the portfolio was not being used to its full potential with suggestions that all experiences that fall within the midwife scope of practice should be recorded as evidence of practice experiences. Students felt the current ANMAC Standard 8.11 requirements limit the range of experiences and are repetitive in requiring up to 100 recordings for some experiences. No nationally agreed format exists of how students are required to document their required ANMAC experiences. (Author)

2022-01409

Bounce back- bounce forward: Midwifery students experience of resilience. Clohessy N, McKellar L, Fleet J (2019), Nurse Education in Practice vol 37, May 2019, pp 22-28

Resilience is considered a vital characteristic and has gained attention in midwifery practice and education. In particular, midwifery students face challenges during their education in both academic and clinical components of the program. There is need for greater understanding and strategies to develop resilience in the midwifery student population. The aim of this study is to gain insight into how midwifery students conceptualise resilience, and explore how education might support the development of resilience. A focus group was conducted as part of a broader study underpinned by a concept analysis methodology to explore the students understanding of resilience. Participants included six third year midwifery students from one university. Thematic analysis was used to analyse the data. Four key themes were identified. Resilience contextualised to midwifery was triggered by exposure to adversity; resilience was identified as the ability to bounce back and move forward, and was seen to be important for midwifery students. The concept of resilience appears to play an important role in student success. Evidence suggests resilience

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can be developed and education providers have a role to foster student's resilience. Findings offer strategies to strengthen resilient behaviour for the midwifery student population and provide a basis for further research. (Author)

2022-01405

Perceptions of the possible impact of dyslexia on nursing and midwifery students and of the coping strategies they develop and/or use to help them cope in clinical practice. Crouch AT (2019), Nurse Education in Practice vol 35, February 2019, pp 90-97

This qualitative grounded theory case study aimed to explore the perceptions of the impact of dyslexia on nursing and midwifery students and of the coping strategies they develop and/or use to help them cope in practice. The questions addressed were:

1. What is the perceived impact of dyslexia on the nursing and midwifery student in clinical practice?
2. How are any difficulties associated with dyslexia managed by the nursing or midwifery student?
- 3i. What strategies can help and support nursing and midwifery students with dyslexia?
- 3ii. What are students' and mentors' perceptions of the poster guidelines used by mentors to support nursing and midwifery students with dyslexia in the clinical practice?

Having obtained ethical approval for the research and participants informed written consent, a purposive sample of 12 nursing and midwifery students and 22 mentors participated in the study. Data were collected by digitally recorded semi-structured interviews, content analysis of students' practice portfolios and files from students. Evaluative comments from mentors were also collected. Data were analysed using Glasarian grounded theory method.

Dyslexia impacted on the students practice negatively and positively. They developed and used simple and other strategies, including those on the poster guidelines, which were evaluated positively. (Author)

2022-01245

Challenges faced by student nurses and midwives in clinical learning environment – A systematic review and meta-synthesis. Panda S, Dash M, John J, et al (2021), Nurse Education Today vol 101, June 2021, 104875

Objectives

This systematic review aimed to offer insight and understanding, through synthesis of findings from studies that report on perspectives of student nurses/midwives, clinical instructors, clinical nurses/midwives on the challenges faced by student nurses/midwives in the clinical learning environment (CLE).

Design

All primary qualitative research studies published in the English language that reported on the views of student nurses/midwives, clinical instructors and clinical nurses/midwives on the challenges faced by student nurses/midwives in the CLE were included.

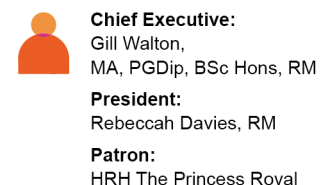
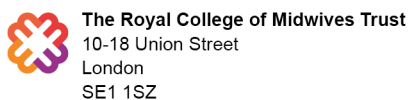
Data sources

The electronic databases of Medline EBSCO (1946-), CINAHL (1970), Embase Ovid (1974-), ScielO, WHOLIS (2002-), ASSIA (1985-), Web of Science (1956-), PsycINFO (1800s-) and Maternal and Infant Care (1970-) were searched in November 2019.

Review methods

Retrieved papers were reviewed independently by two authors for selection by title, abstract and full text, and two authors agreed for inclusion of the papers. The COREQ criteria checklist was used for assessment of methodological

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quality of the included studies.

Results

The review included 32 studies published over 22 years between 1997 and 2019 involving 853 nursing/midwifery students, clinical instructors, and clinical nurses/midwives from 14 countries. Three key themes emerged: 'The support structure', 'Personal factors', and 'Planning and organisation – influence of extrinsic factors'.

Conclusion

Attitude of clinical staff, instructors, and significant others had a major influence on students' clinical learning. Lack of a sense of belongingness and self-motivation to learn, and perceived fear of doing errors were some of the demotivating factors. Lack of resources to facilitate need-based training, staff shortages, workload and inconsistencies between theory and practice were other key challenges in the CLE. Understanding the challenges faced by students in clinical practice can help overcome the barriers leading to development of competent and confident nurses and midwives. (Author)

Full URL: <https://doi.org/10.1016/j.nedt.2021.104875>

2022-01240

Student midwives' perception of peer learning during their clinical practice in an obstetric unit: A qualitative study.

Zwedberg S, Alnervik M, Barimani M (2021), Nurse Education Today vol 99, April 2021, 104785

Background

Evidence supports peer learning in clinical settings, but it has not been studied in obstetric units. In Sweden, obstetric units are a challenging learning area for student midwives because of the lack of attention to student needs and the stress of attaining the final number of 50 assisted births.

Objectives

To explore how student midwives experienced peer learning during clinical placement in an obstetric unit.

Design

Qualitative approach.

Settings

Three hospitals and obstetric units in Stockholm, Sweden.

Participants

Fifteen student midwives in a peer-learning model during clinical placement.

Methods

Individual interviews followed by deductive content analysis using Boud's (2001) theoretical descriptions of peer learning.

Results

The students shared skills, experience, and knowledge as equals and took responsibility for their peers' learning while supporting women in labor and childbirth. Students shared ideas, thoughts, and knowledge and gained perspective while learning as peers on an equal level. Students used each other to work independently without much involvement from the preceptor. Feedback was welcomed as encouragement.

Conclusions

Peer learning had positive consequences as an educational model in the clinical context in obstetric units. (Author)

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2022-01217

The experiences of nurses and midwives regarding nursing education in Ghana: A qualitative content analysis. Salisu WJ, Sadooghiasl A, Yakubu I, et al (2020), Nurse Education Today vol 92, September 2020, 104507

Background

The nursing education in Ghana has only witnessed minimal advancement though one of the earliest in Africa. This study aimed to explore nursing education in Ghana at the bachelor degree level in terms of the program's strengths, weaknesses, opportunities, and threats from the perspectives of nurses and midwives.

Methods

A qualitative design based on the content analysis approach was used in this study. We purposefully sampled and interviewed thirty-five nurses and midwives at the Tamale Teaching in Ghana from September 2018 to May 2019.

Results

The data analysis revealed five main categories; professionally developed, diverse implementation, insufficient resources, applied opportunities, and threatening policies. The findings highlight the strengths, weaknesses, opportunities, and threats of nursing education at the bachelor degree level in Ghana.

Conclusion

The nursing education in Ghana has some internal capabilities in the form of strengths and weaknesses, such as the program being professionally regulated and operates on a well-developed curriculum, yet challenged with insufficient faculty and resources. The external opportunities and threats present as global recognition and career opportunities, amidst the proliferation of adjunct nursing programs. Recommendations have been highlighted.

(Author)

2022-00781

Critical thinking. Nash K, Sloam D (2022), British Journal of Midwifery vol 30, no 3, March 2022, pp 126-127

Kate Nash and Debra Sloam explore the benefits of critical thinking and the A-EQUIP model for student midwives.

(Author)

2022-00217

Emergency remote teaching for interprofessional education during COVID-19: student experiences. Sy MP, Park V, Nagraj S, et al (2022), British Journal of Midwifery vol 30, no 1, January 2022, pp 47-55

This is the third in a series of articles exploring experiences of engaging with interprofessional education during the COVID-19 pandemic. This article focuses on experiences of emergency remote teaching from the student perspective, considering the enablers and barriers to effective learning and taking into account the logistical, technological and theoretical considerations for facilitating an authentic learning experience in line with professional standards. A global perspective of interprofessional education during lockdown is provided through case studies, providing an opportunity to benchmark against examples of best practice to ensure online interprofessional education is successful in preparing students to work within a multiprofessional, multi-agency team to provide high-quality care through effective team working. (Author)

2022-00141

Number of students in clinical placement and the quality of the clinical learning environment: A cross-sectional study of nursing and midwifery students. Kwadan AN, Abuosi AA, Anaba EA, et al (2022), Nurse Education Today vol 108, January 2022, 105168

Background

Clinical placement is an important component of nursing and midwifery education. It exposes students to the real-world healthcare environment, where theoretical knowledge is put into practice. However, the quality of the

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clinical learning environment in sub-Saharan Africa has not been well explored.

Objective

The objectives of this study were to assess trainees' perceptions of the number of students on the ward or clinical unit, and the quality of the clinical learning environment.

Design

Cross-sectional survey.

Setting

Nursing and midwifery students were recruited from three public hospitals in the Upper East Region, Ghana, between July and August 2019.

Participants

254 nursing and midwifery students were recruited using the convenience sampling technique.

Methods

Data were collected with the Clinical Learning Environment and Supervision + Nurse Teacher questionnaire. Data were analysed using univariate, bivariate and multivariable analyses.

Results

It was found that the participants rated supervisory relationship; pedagogical atmosphere; role of nurse teacher; leadership style of ward managers; and premises of care on the ward as average. Students' perceptions of the quality of the clinical learning environment were predicted by supervisory relationship ($\beta = 0.219$, 95% CI: 0.016-0.070), leadership style ($\beta = 0.199$, 95% CI: 0.011-0.133) and perception of number of students in clinical placement ($\beta = 0.224$, 95% CI: 0.022-0.093). The trainees indicated that the number of students on the ward did not correspond with the amount of medical equipment and supervisors.

Conclusion

The quality of the clinical learning environment was perceived to be suboptimal. Leadership style, supervisory relationship and perception of the number of students on the ward were the salient factors that influenced students' perceptions of the quality of the clinical learning environment. Leaders of nursing and midwifery training institutions must liaise with stakeholders to enhance the quality of the clinical learning environment. (Author)

2022-00140

Experience of undergraduate midwifery students faced with perinatal death in clinical practice: A qualitative study.

Shen Q, Liang J, Gao Y (2022), Nurse Education Today vol 108, January 2022, 105159

Background

Student midwives often encounter perinatal loss including stillbirth and neonatal death as part of their clinical training. There has been limited research on how student midwives cope with perinatal death.

Objective

To explore the experiences of undergraduate midwifery students facing perinatal death during their internships.

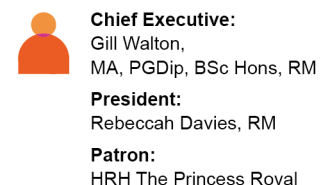
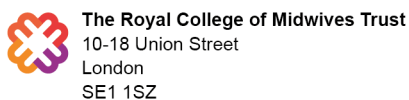
Design

Qualitative research design based on interpretive phenomenological approach and COREQ-guided reporting.

Setting

Tertiary maternal and child care center or general hospital.

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Participants

Undergraduate midwifery students from a medical university in Guangzhou, China.

Methods

Study participants were recruited through purposive sampling. Semi-structured in-depth interviews were conducted between October 2020 and March 2021 with 12 midwifery students. Transcripts of the interviews were analyzed using Diekemmann's interpretive method.

Results

Four themes were identified from the data: unavoidable anxiety and avoidance response; overwhelming fear and taboos related to death; self-blame and emotional inhibition; and ethical conflict and reflection on practice.

Conclusions

Undergraduate midwifery students believed they were ill-prepared to care for women who experienced perinatal loss, consciously endured their own negative emotions such as anxiety and fear, and hoped for improved bereavement and stillbirth care in future clinical practice. Students valued support from the bereavement midwife and identified effective strategies that would help them cope with their feelings. It is recommended that adequate education and emotional support be provided to midwifery students, who should be encouraged to provide appropriate care to grieving families. (Author)

2022-00064

Decolonising education. Various (2020), *Midwives* vol 23, September 2020, pp 38-42

From encountering ignorance and prejudice on placements, to white-skin bias in the midwifery curriculum, BAME students are taking action to amplify black and brown voices and challenge the status quo. (Author)

2021-14545

Reflection for validation: focusing on mental health. Taylor M (2022), *MIDIRS Midwifery Digest* vol 32, no 1, March 2022, pp 21-23

The author reflects on her experience as a student midwife caring for a woman with complex needs and mental health difficulties. Highlights the importance of non-verbal communication and individualised care to gather a holistic understanding of patient wellbeing. (LDO)

2021-14299

Midwives: Students [written answer]. House of Commons (2022), Hansard Written question 118634, 4 February 2022

Edward Argar responds to a written question from Taiwo Owatemi to the Secretary of State for Health and Social Care, regarding how many student midwives were in receipt of a bursary in the most recent two academic years for which figures are available; what the average bursary paid to a student midwife was in each of those years; and what the total cost of those bursaries was to his Department in each year. (MB)

Full URL: <https://questions-statements.parliament.uk/written-questions/detail/2022-02-04/118634>

2021-14230

Preliminary evaluation of a Web site to support students with dyslexia at the Sheffield University School of Nursing and Midwifery. Wright DJ, Baptista Nunes JM *Citeseer* No date. 5 pages

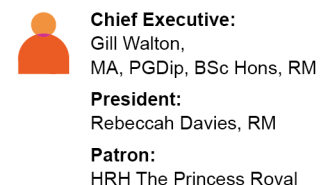
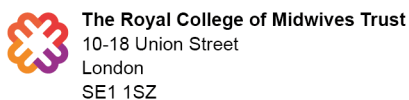
The Dyslexia Information Site (DiS) is a live research project and results from an interdisciplinary partnership between the School of Nursing and Midwifery (SNM) and the Department of Information Studies. The design of the DiS site takes into account the problems of nursing students with dyslexia and specific needs that are not met elsewhere.

Requirement analysis for the site included the

identification and evaluation of general dyslexia issues and how they apply to nursing students as well as the needs of

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tutors supporting them. The site is now being tested as a means of using the web to provide just-in-time anonymous support to students with dyslexia; and specific information to tutors who support them. This paper presents the preliminary results of this evaluation. (Author)

Full URL: <https://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.104.4442&rep=rep1&type=pdf>

2021-14229

Evaluation of a clinical needs assessment and exploration of the associated supports for students with a disability in clinical practice: Part 2. Howlin F, Halligan P, O'Toole S (2014), Nurse Education in Practice vol 14, no 5, September 2014, pp 565-572

Engagement and successful completion of nursing and midwifery programmes may be predicated on the identification and implementation of reasonable accommodations to facilitate clinical learning for students with a disability. This qualitative study aims to evaluate a clinical needs assessment for students with a disability and explore their experiences of support in clinical practice. A purposive sample of year one undergraduate students was used. Four students consented to participate and undertook an individual interview. Their disabilities were categorised as specific learning disability (dyslexia) (n = 3) and mental health (n = 1). Data analysis revealed two main themes 'students' experiences of disclosure' and 'receiving support'.

Findings revealed that all students disclosed on placement, however, the extent of disclosure was influenced by personal and environmental factors. Students used the clinical needs assessment to highlight accommodations to clinical staff on placement. Issues of concern that arose, included communication between all key stakeholders, negative staff attitudes and the need to improve the provision of accommodations.

This preliminary evaluation indicates that the Clinical Needs Assessment bridges the gap in provision of student support between higher education and healthcare institutions. Findings suggest that competence based needs assessments can identify individualised reasonable accommodations for students undertaking clinical placements. (Author)

2021-14148

Development and implementation of a clinical needs assessment to support nursing and midwifery students with a disability in clinical practice: Part 1. Howlin F, Halligan P, O'Toole S (2014), Nurse Education in Practice vol 14, no 5, September 2014, pp 557-564


Equality and disability legislation, coupled with increasing numbers of students with a disability, and inadequate supports in clinical practice, acted as catalysts to explore how best to support undergraduate nursing and midwifery students on clinical placements. Historically, higher education institutions provide reasonable accommodations for theoretical rather than clinical modules for practice placements. This paper describes the development and implementation of a Clinical Needs Assessment designed to identify the necessary supports or reasonable accommodations for nursing and midwifery students with a disability undertaking work placements in clinical practice.

The existing literature, and consultation with an expert panel, revealed that needs assessments should be competency based and clearly identify the core skills or elements of practice that the student must attain to achieve proficiency and competence. The five Domains of Competence, advocated by An Bord Altranais, the Nursing and Midwifery Board of Ireland, formed the framework for the Clinical Needs Assessment. A panel of experts generated performance indicators to enable the identification of individualised reasonable accommodations for year 1 nursing and midwifery students in one Irish University. Development and implementation of the Clinical Needs Assessment promoted equality, inclusion and a level playing field for nursing and midwifery students with a disability in clinical practice. (Author)


2021-14147

Experiences of non-dyslexic and dyslexic nursing and midwifery students: how best can their needs be met by

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Personal Academic Tutor support? Crouch A (2017), *Enhancing the Learner Experience in Higher Education* vol 2, no 1, 2017, pp 1-18

The Nursing and Midwifery Council (2008a; 2008b) not only requires employers to support nondyslexic students but also requires evidence of how disabled 'students would be supported both in clinical practice and in the academic environment to help facilitate safe and effective practice sufficient for future registration' (NMC 2004, p. 12). Limited research on personal tutor support in nursing and midwifery led to the need for a qualitative study which explored the experiences and needs of 15 non-dyslexic and 7 dyslexic nursing and midwifery students, in relation to personal academic tutor support. Data was collected by one-to-one face-to-face tape-recorded interviews which were then transcribed using semi-structured questions. Analysis of the data by constant comparative method (Glaser & Strauss, 1999) assisted by the computer software Nvivo8 were used to analyse data. Themes generated suggest that many of the dyslexic and non-dyslexic students in this study view their experience of their personal tutor as 'supportive' but Professional needs for both dyslexic and non-dyslexic students and their perception of how tutors could help seem to vary. (Author)

2021-14146

The perceptions of how dyslexia impacts on nursing and midwifery students and the coping strategies they develop/use to manage difficulties associated with dyslexia in clinical practice; an embedded case study. Crouch A (2017), Northampton: University of Northampton 2017. 327 pages

The aims of this research were to explore the perceptions of the impact of dyslexia on nursing and midwifery students in practice, and of the coping strategies they develop and/or use to help them cope. To achieve the above aims, the following questions were set and addressed:

1. What is the perceived impact of dyslexia on the nursing and midwifery student in clinical practice?
2. How are any difficulties associated with dyslexia managed by the nursing or midwifery student?
- 3i What strategies can help and support nursing and midwifery students with dyslexia?
- 3ii What are students' and mentors' perceptions of the poster guidelines (developed following a previous study), which are designed to help and support nursing and midwifery students with dyslexia in clinical practice?

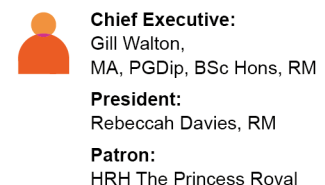
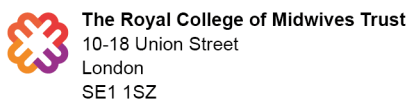
A qualitative study underpinned by a constructivist, interpretive ontological perspective was undertaken, based on a grounded theory case study approach. After seeking and gaining research ethics approval and informed written consent from potential participants, a purposive sample of 12 nursing and midwifery students with dyslexia, and 22 mentors was recruited and used for the study. Varied methods including tape-recorded semi-structured interviews and content analysis of students' practice portfolios (n=8) and files (n=12) were used to collect data from the students. Evaluative comments from the mentors were also collected. The data were then analysed using Glasarian grounded theory method. Findings suggest that dyslexia impacts on the student negatively as well as positively. There was expression of strong support with reference to demonstration of empathy and acceptance of students with dyslexia in both academic and practice settings, however, disclosure remained an issue for some students. Apart from already available strategies, the students managed to develop and use simple and effective coping strategies in a non-stressful environment. In a busy environment however, they became stressed and frustrated with cascading effects. Many of the strategies used including the poster guidelines were identified as very useful and/or helpful and suggestions made by both students and mentors led to the development of a tool kit to be used interactively by the students and their mentors in practice. (Author)

Full URL: [http://nectar.northampton.ac.uk/10128/1/Crouch Anna 2017 The perceptions of how dyslexia impacts on nursing and midwifery students and the coping strategies they develop use to manage difficulties associated with dyslexia in clinical practice an embedded case study.pdf](http://nectar.northampton.ac.uk/10128/1/Crouch%20Anna%202017%20The%20perceptions%20of%20how%20dyslexia%20impacts%20on%20nursing%20and%20midwifery%20students%20and%20the%20coping%20strategies%20they%20develop%20use%20to%20manage%20difficulties%20associated%20with%20dyslexia%20in%20clinical%20practice%20an%20embedded%20case%20study.pdf)

2021-13103

The lived experience of being an undergraduate midwifery student in the neonatal unit. Mulligan K, Frawley T (2022),

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Aim

The objective of this study is to examine the experience of undergraduate student midwives in the neonatal unit.

Background

Clinical experience is an essential component of education for the development of competent midwives. Literature has highlighted the pivotal effects of precepting and how it contributes to student experience. Although there is a plethora of research examining undergraduate student midwives' experience, to our knowledge this is the first study exploring their experience in the neonatal unit.

Design

Based in phenomenology, eight semi-structured interviews were conducted producing rich data.

Methods

Following informed consent and ethical approval, post transcription, the data were coded using Colaizzi's (1978) framework.

Results

Significant themes and sub-themes emerged such as course design, environmental experience, sources of stress and preceptor experience. The student experience very much depends on the preceptor, how busy the environment is and if appropriately staffed.

Conclusions

Based on these findings there are suggested recommendations including adjusting the timing and length of the placement and how to improve the environment based on the preceptor-student relationship. Also, suggestions on how consistency and communication can be improved are proposed. (Author)

2021-12114

A student midwife. Goh K (2021), *Midwives* vol 24, November 2021, pp 32-33

Kristina Goh was on a placement with a specialist midwife supporting migrant women and refugees. (Author)

2021-11169

Effective workforce planning: Understanding final-year nursing and midwifery students' intentions to migrate after graduation. Deasy C, O Loughlin C, Markey K, et al (2021), *Journal of Nursing Management* vol 29, no 2, March 2021, pp 220-228

Aims: To examine the factors influencing final-year nursing/midwifery students' intentions to migrate following graduation.

Background: With expanding global staff shortages, effective recruitment and retention strategies targeted at new nursing/midwifery graduates are necessary. Understanding factors that influence graduates' decisions to migrate or remain in the health care organisation that supported their education is essential but under-researched.

Methods: A cross-sectional electronic survey was distributed to graduating nursing/midwifery students across nine higher education institutions in Ireland with a 36% (N = 407) response rate.

Results: 85% of Irish (n = 376) nursing/midwifery graduating students reported an intention to migrate overseas and 70% intend to return within 5 years. Pay, working conditions and career were ranked as influencing intentions to migrate. Multivariable analysis illustrated that educational opportunities and friends predict migration, while family and obligation were protective factors.

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Conclusion: Nursing and midwifery leaders and policymakers must reconsider recruitment and retention strategies and embrace innovative and responsive approaches to address migration intentions and trends.

Implications for nursing/midwifery management: Strategic leadership is required to develop effective structures that support personal, professional and career opportunities for new graduates. Targeted recruitment innovations to entice graduates back into the health service are recommended. (Author)

2021-10339

Facilitators and barriers to competence development among students and newly qualified nurses, midwives and medical doctors: a global perspective. Goshomi U, Bedwell C, Mudokwenyu-Rawdon C, et al (2021), African Journal of Midwifery and Women's Health vol 15, no 2, April 2021

Background

The availability of a skilled health professional (nurse, midwife or doctor) who has been trained and is fit for practice to provide maternity care is fundamental in scaling down and ending preventable maternal and child deaths. Knowing the determinants of the development of ideal skills for effective practice ensures that women and their babies receive quality maternity care services from skilled birth attendants who are fit for practice. This study aimed to find and build on the existing evidence addressing aspects linked to competence and confidence development during training among students, newly qualified nurses, doctors and midwives from a global perspective.

Methods

A literature review was undertaken, using the 'SPIDER' search strategy to identify relevant papers from multiple databases. Studies were included if they were written in English and related to midwives, nurses and medical doctors when they were students, newly qualified professionals or after they had been working for 3-4 months. Opinion or non-empirical papers, editorials, conference papers and empirical articles with abstracts were excluded. Search words were used to identify papers that examined competence and confidence development while training these health professionals. A total of 2281 papers were identified, from countries in Europe, Australia, Asia, America and Africa. Overall, 62 papers were analysed.

Results

One core category, 'learning environment', emerged, with two overarching subcategories, 'internal environment' and 'external environment' when examining facilitators and barriers to competence and confidence development.

Conclusions

Facilitators and barriers to competence and confidence development are centred on the learning and practice environment. These are difficult to separate, as they are driven by either the student's or the newly qualified professional's experience with the learning and practice environment. This highlights the need for diversity and open mindedness among mentors and administrators in manipulating the environment to the benefit of either the student or the newly qualified professional so that mothers and their babies receive quality care. (Author)

2021-10327

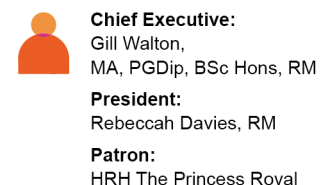
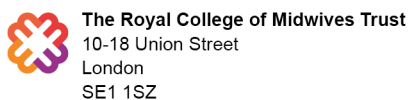
"I wondered how I would manage the commitments": exploring challenges to accessing midwifery training. Molineux S, Foster J (2021), The Student Midwife vol 4, no 4, October 2021, pp 11-14

Students enter midwifery training at every stage of life; it is never too late. There are numerous pathways, with individual circumstances varying widely. Personal responsibilities, particularly common for mature students, can make the commitment of a midwifery degree daunting. In this article, Stacey Molineux and Jennifer Foster discuss managing their caring and financial responsibilities alongside training and reveal strategies to overcome these challenges.

(Author)

2021-10318

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Confidence among midwifery students in providing postnatal care at completion of training in selected midwifery schools in Zambia. Zulu M, Maimbolwa MC, Sianchapa B, et al (2020), African Journal of Midwifery and Women's Health vol 14, no 4, October 2020

Background/Aims

Quality midwifery education is important in empowering student midwives with the confidence, knowledge, skills and attitudes relevant to the provision of quality postnatal care. The study aimed to assess confidence in providing postnatal care among midwifery students upon completion of training at selected midwifery schools in Zambia.

Methods

A cross-sectional survey was conducted in November 2016 at 5 of the 13 midwifery schools in Zambia. The sample comprised 194 finalist midwifery students who were purposively selected. Ethical approval was sort from the University of Zambia Research and Ethics Committee and participants signed informed consent forms. A self-administered questionnaire was used for data collection. Data were analysed using SPSS version 20, and the chi-squared test was used to analyse the significance of the relationship between variables, with significance set at 0.05.

Results

Almost all (97%) student midwives were confident in their ability to provide postnatal care independently. Most stated that they had enough time to practice in the skills laboratory (63%) and were confident when they practiced on mothers and their babies for the first time (62%). The majority (82.5%) were satisfied with the supervision they received from their mentors. Confidence to provide postnatal care independently was significantly associated with the confidence to practice for the first time on mothers and their newborns ($P=0.007$) and with satisfaction with clinical supervision ($P=0.004$).

Conclusions

Student midwives were confident in their ability to provide postnatal care. Time spent practicing in the skills laboratory and the amount of clinical supervision were two factors that enhanced students' confidence. Midwifery schools must emphasise clinical practice and supervision in order to produce confident midwives. (Author)

2021-10002

Professional learning using storytelling videos of childbirth experiences: A qualitative pilot study of student midwives' perceptions in Myanmar. Noya A, Oguro M, Horiuchi S (2021), Japan Journal of Nursing Science 28 September 2021, online

Aims

To explore and describe Myanmar student midwives' perceptions of professional learning using storytelling videos of women's childbirth experiences by conducting a qualitative study and to assess potential pedagogical uses of storytelling videos in midwifery education.

Methods

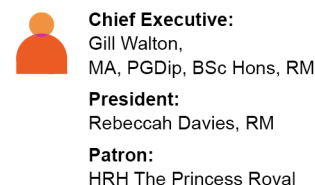
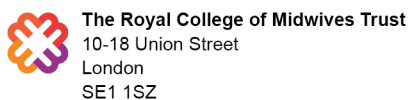
This pilot study used a qualitative content analysis study design implemented as part of the Diversity and commonalities of birth from women's voice sharing project of the Toyota Foundation. Storytelling videos of the childbirth experiences of seven Asian women (three Myanmar, three Lao, and one Japanese women) were viewed by the students. Thereafter, a semistructured interview with focus group discussion was conducted to explore and assess the students' perceptions.

Setting: Kyaing Tong township, Shan State, Myanmar.

Participants: Five second-year midwifery students from a single midwifery training school in Myanmar.

Results

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Data analysis of their perceptions yielded four major categories: (1) deep reverence for women/mothers;; (2) respectful attitude as a midwife to support mothers; (3) wish for a safe and secure birth environment; and (4) importance of learning from the mother's voice.

Conclusions

The student midwives realized the importance of listening to the mothers' voices regardless of the nationalities or cultural background. The findings indicated that the storytelling videos broadened the students' perspectives of pregnancy and childbirth, and motivated them to provide better maternity care. Storytelling videos of childbirth experiences can be powerful educational materials for enhancing professional learning of student midwives. (Author)

Full URL: <https://doi.org/10.1111/jins.12456>

2021-09126

Check in&Chat. Hughes J (2021), *Midwives* vol 24, September 2021, pp 22-23

Jemma Hughes, third-year student midwife at Cardiff University, understands the importance of creating compassionate communities. (Author)

2021-08924

The parents are watching: Midwifery students' perceptions of how workplace bullying impacts mothers and babies.

Capper TS, Muurlink OT, Williamson MJ (2021), *Midwifery* vol 103, December 2021, 103144

Problem

Bullying in the midwifery profession has been documented and the problem is now known to extend to the poor treatment of midwifery students. In nursing, research has shown that bullying in the clinical workplace can adversely impact on quality of care. To date, no research has explored whether the bullying of midwifery students has secondary impacts on the experiences and care of mothers, babies, and their support persons.

Aim

To examine how midwifery students, who self-identify as having been bullied, perceive the repercussions on women and their families.

Methods

This qualitative descriptive study explored 120 Australian and United Kingdom (UK) based midwifery students. Data were collected using an anonymous online qualitative survey and were thematically analysed.

Findings

The findings suggest that the bullying of midwifery students impacts women and their families in a number of ways. Midwifery students perceive that mothers and babies are frequently implicated either directly or indirectly in the enactment of bullying. This can impact their safety, fractures relationships, and impairs the women's confidence in the student and the profession. Students additionally reported that women and/or their support persons can feel compelled to step in to defend and protect the student.

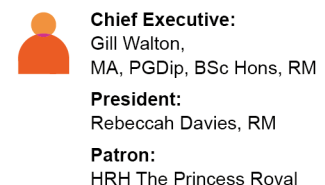
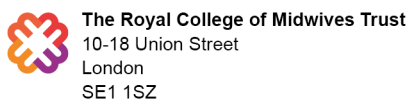
Conclusions

The bullying of midwifery students is perceived to place women at risk, in uncomfortable situations, damage rapport and undermines their confidence in students and the profession. This also impacts adversely on the student's ability to provide women centred care as they lose confidence in front of the woman and her family when they are bullied by registered midwives. (Author)

2021-08155

Experiences of being a midwifery student during these challenging times. Hamza H (2021), *MIDIRS Midwifery Digest* vol 31, no 3, September 2021, pp 297-299

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March 2021 marks one year since we went into lockdown in the United Kingdom (UK). Coincidentally, it is also the anniversary of my enrolment on the BSc (Honours) Midwifery Programme at the University of Northampton. I became a student midwife in the middle of a global pandemic, just as the UK went into its first lockdown. (Author)

2021-08127

What support do nurses and midwives qualifying in the age of Covid-19 need? Insights from UNISON members 2021.

Unison Health (2021), London: UNISON 25 August 2021

Presents the key findings of a UNISON survey of students and newly qualified nurses and midwives. It reveals that many of those who completed their studies during the Covid-19 pandemic feel unprepared and unsupported in their first roles, having often missed out on important learning experiences. Calls for constructive and meaningful support in the workplace to allow those newly qualifying to fulfil their potential. (CI)

Full URL: <https://www.unison.org.uk/content/uploads/2021/08/UNISON-Health-NQN-NQM-support-during-Covid-19-1.pdf>

2021-07527

Learning throughout the storm. Nash K, Dalcin Zanchin C, Legge T (2021), British Journal of Midwifery vol 29, no 8, August 2021, pp 426-428

Newly qualified midwives highlight the lessons they learnt during their final year of training during the global pandemic. (Author)

2021-07113

The role of volunteering. O'Connor C (2021), World of Irish Nursing & Midwifery vol 29, no 4, May 2021, p 39

As we celebrate both the International Day of the Midwife and International Nurses' Day, both caring professions, Catherine O'Connor spoke with some INMO student members about their experience of extracurricular volunteering. (Author)

Full URL: <https://online.flippingbook.com/view/218700746/38/>

2021-06585

Lockdown 1.0: a different opportunity. Stanhope J, Hepburn A, Lipski D, et al (2021), The Student Midwife vol 4, no 3, July 2021, pp 29-32

In March 2021, the UK went into lockdown due to COVID-19. Hospitals began prioritising emergency work, which had a knock-on effect for student midwives. Ultimately, the decision was made to temporarily suspend placements and offer a paid alternative to provide an additional workforce to the National Health Service (NHS). However, there were many students who were unable to commit to an extended paid placement. This article explores the journey made by three midwifery students from Robert Gordon University (RGU), as they achieved their placement module through a practice-based project. (Author)

2021-06578

Nurture me and watch me grow! Kameka C (2021), The Student Midwife vol 4, no 3, July 2021, p 11

Codie Kameka provides insight into the pathway to registration as a midwife in Jamaica, as well as how her experience as a student midwife will shape her midwifery career. (Author)

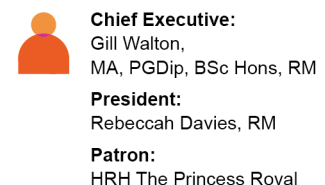
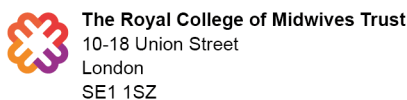
2021-06294

A survey of midwifery graduates' opinions about midwifery education in Iran: a cross-sectional study. Toosi M, Modarres M, Amini M, et al (2021), BMC Medical Education vol 21, no 340, 10 June 2021

Background

Attaining high-quality education requires continuous evaluation and revision of the curriculum. The view of the graduate students can provide valuable insight into the necessary evaluations and revisions. Therefore, this study

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aimed to evaluate the opinions of midwifery graduates about midwifery education in Iran

Methods

This was a descriptive cross-sectional study and the research data were collected through a census sampling procedure from all (82) midwifery graduates of the Nursing and Midwifery School of Shiraz University of Medical Sciences between 2018 and 2020. The data collection instrument was a validated researcher-made questionnaire derived from the Graduation Questionnaire (GQ) developed by the Association of American Medical Colleges (AAMC). The data were then analyzed using SPSS 22.

Results

In this study, about 62% of the graduates were satisfied with the quality of the midwifery education they had received during the four-year program. Moreover, 61% of the graduates maintained that theoretical courses were well-integrated with the clinical experience they needed. The quality of the internships in different wards and departments was also evaluated from the viewpoints of the graduates, and the results indicated that they were relatively satisfied with their internship experiences. However, only 40% of the graduates were satisfied with the quality of their clinical evaluation, since they faced the most significant challenges in the clinical and maternity wards (47%) with the midwifery staff and gynecology residents and found the quality of facilities in the clinical program to be lacking. According to the participants, the quality of teaching was not good for some courses such as biochemistry and microbiology.

Conclusion

It seems that the midwifery curriculum needs to be constantly revised, aiming to improve student satisfaction with their midwifery education. Some effective measures in this regard are employing experienced professors, developing cooperation between midwifery instructors and clinical departments, and trying to improve the educational environment. Attention to the improvement of facilities and equipment and agreement between the content of the theoretical education and practical topics are also recommended to improve the quality of midwifery education.

(Author)

Full URL: <https://doi.org/10.1186/s12909-021-02764-y>

2021-06289

Midwifery students' expectations of and experiences with ethics education: A qualitative study. Megregian M, Kane Low L, Emeis C, et al (2021), Nurse Education Today vol 105, October 2021, 105035

Background

Instruction in ethics is an essential component of midwifery education. However, the evidence for how midwifery students experience ethics instruction in the classroom and via clinical experience is limited.

Objective

This study explores midwifery students' perceptions of ethics education and their opinions about essential components of ethics education.

Design

This was a qualitative descriptive thematic study, exploring student midwives' experiences of ethics education in their midwifery programs. We conducted focus group interviews with students from three midwifery programs in the United States (U.S.).

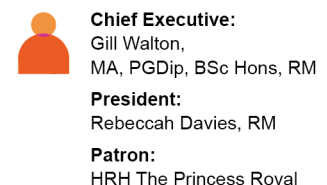
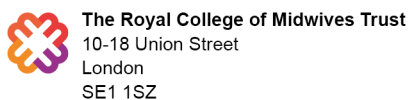
Setting

Graduate midwifery educational programs in the United States.

Participants

Thirty-nine students from three graduate midwifery programs participated in four focus group discussions.

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Results

Thematic analysis identified three primary themes and associated subthemes: 1) current experience and identified needs, 2) the preceptor dilemma, with subthemes the critical role of modeling ethics and powerlessness within interprofessional conflicts, and 3) complicated relationships: advocacy, autonomy and choice. Students relied primarily upon clinical preceptors rather than classroom discussion as a significant source of learning ethics content and ethical behavior. Students called for explicit identification of ethics learning when it occurs, particularly midwifery-specific content, as well as increased opportunities for reflection and integration of their experiences.

Conclusion

This study shows the need for intentional inclusion of midwifery-specific ethics content into the overall midwifery education program content, in both classroom and clinical experiences. Midwifery programs should integrate ethics content in their curricula in a way that complements other midwifery content. This study also demonstrates the key role of clinical preceptors in student ethics learning. (Author)

2021-05752

Barriers to healthy lifestyle behaviors in Australian nursing students: A qualitative study. Thwaite T, Heidke P, Williams SL, et al (2020), *Nursing & Health Sciences* vol 22, no 4, December 2020, pp 921-928

Studying at university is stressful, which can lead to unhealthy lifestyle behaviors. This study aimed to explore perceived reasons and barriers preventing Australian nursing students from engaging in a healthy lifestyle and strategies to overcome barriers. Fifty-four bachelor of nursing students participated in seven focus groups between July and November 2018. Participants defined healthy lifestyle behaviors as eating well; regular physical activity; regular water consumption; limiting alcohol, caffeine, and nicotine; good sleep quality; stress management and relaxation; and regular social interaction and support. They identified individual (lack of motivation, existing bad habits, lack of knowledge), environmental (time, finances, limited access to healthy food and physical activity resources), and psychosocial (competing priorities, increased learning cognitive load, lack of social interaction and support, compassion fatigue, and shift work) barriers preventing healthy lifestyle. Participants proposed several individual and system-related strategies to overcome barriers. Despite portraying a comprehensive understanding of healthy lifestyle behaviors, students reported finding difficulty in attaining healthy lifestyles. Strategies proposed by students may inform targeted interventions aiming to increase overall health of students, reduce attrition rates, and promote workforce retention post-graduation. (Author)

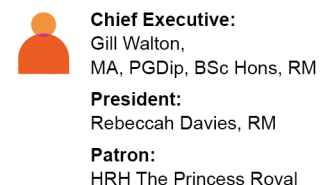
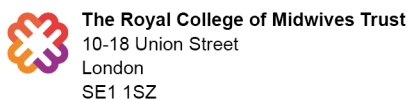
2021-05244

An exploration of the development of resilience in student midwives. Williams J, Lathlean J, Norman K (2021), *British Journal of Midwifery* vol 29, no 6, June 2021, pp 330-337

Student midwives have to complete a demanding programme to become a midwife, and therefore it is questioned whether they need resilience to be successful. The study's aims were to explore whether resilience developed in one cohort of 25 undergraduate student midwives and what the concept of resilience meant to them. This study adopted a longitudinal case study approach in one Higher Education Institution in England during the first 18 months of their programme. The study used Wagnild and Young's (1993) (updated 2015) True Resilience Scale© (1), administered on three occasions. Additionally, four focus groups were conducted twice and six participants were involved in one-to-one interviews to explore issues raised in the focus group. SPSS Pairwise comparisons revealed that there were significant differences in True Resilience Scale© scores between the first and the second completion ($p=0.034$), and time one and time three ($p=0.002$); there were no significant differences between time two and time three ($p=1.0$). In this cohort of student midwives, the scale showed that the majority had developed their resilience during the study and this was supported in what the students reported. A conceptual model, which defines resilience for student midwives, is presented to strengthen how resilience can be supported and developed. (Author)

1. Wagnild G, Young H. *Journal of Nursing Measurement*, vol 1, no 2, 1993, pp 165-178

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2021-04550

African midwifery students' self-assessed confidence in Postnatal and Newborn care: A multi-country survey. Sharma B, Christensson K, Bäck L, et al (2021), Midwifery vol 101, October 2021, 103051

Background

Majority of maternal and new-born deaths occur within 28 hours and one week after birth. These can be prevented by well-educated midwives. Confidence in postnatal and newborn care skills depend on the quality of midwifery education.

Objective

To describe and compare midwifery students' confidence in basic postnatal and new-born care skills and associated factors.

Methods

A multi-country cross-sectional study where final year midwifery students answered a questionnaire consisting of basic skills of postnatal and newborn care listed by the International Confederation of Midwives. The postnatal care area had 16 and newborn care area had 19 skill statements. The 16 skills of postnatal care were grouped into three domains through principle component analysis (PCA); Basic postnatal care; postnatal complications and educating parents and documentation. The 19 skills under the newborn care area were grouped into three domains; Basic care and care for newborn complications; Support parents for newborn care; and Care for newborns of HIV positive mothers and documentation.

Results

In total 1408 midwifery students from seven Sub-Saharan countries participated in the study namely; Kenya, Malawi, Tanzania, Uganda, Zambia, Zimbabwe, and Somaliland Overall high confidence for all domains under Post Natal Care ranged from 30%-50% and for Newborn care from 39-55%. High confidence for postnatal skills was not found to be associated with any background variables (Age, sex, type and level of educational programme). High confidence for newborn care was associated with being female students, those aged 26-35 years, students from the direct entry programmes and those enrolled in diploma programmes.

Conclusions

Almost half of the study participants expressed lack of confidence for skills under postnatal and newborn care. No association was found between high confidence for domains of postnatal care and background variables. High confidence was associated with being a female, between 26-35 years of age, from direct entry or diploma programmes for newborn care area. The results of the study indicate gaps in midwifery education. Countries could use the ICM list of competencies to develop country specific standards for midwifery education. However, actual competence remains to be measured. (Author)

2021-03815

Nursing and Midwifery Students' Satisfaction with Their Clinical Rotation Experience: The Role of the Clinical Learning Environment. Adam AB, Druye AA, Kumi-Kyereme A, et al (2021), Nursing Research and Practice vol 2021, article ID 7258485

Background. The clinical learning environment and clinical rotation experience of students are integral to nursing curriculum and are a crucial component of nursing education which helps transform theoretical knowledge to clinical practical skills. **Objective.** This study was aimed at assessing the role of the clinical learning environment on undergraduate nursing and midwifery students' satisfaction with their clinical rotation experience.

Method. The study employed a quantitative cross-sectional survey design. Data was collected from a sample of 240 undergraduate nursing and midwifery students of the University for Development Studies, Tamale, Ghana, using a structured questionnaire. Ethical approval was obtained from the University of Cape Coast Ethics Review Board. Descriptive analysis was displayed as frequencies and percentages. Inferentially, Fisher's exact test, linear regression, and Spearman's correlation tests were used to test for and quantify associations between independent and

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dependent variables at $p \leq 0.05$.

Results. The level of students' satisfaction with both clinical rotation experience and the clinical learning environment was high (65.6% and 63.5%, respectively). A statistically significant association of the students' satisfaction with their clinical rotation experience was found. There was a statistically significant relationship between the clinical learning environment ($\chi^2 (9, N = 224) = 80.665, p < 0.001$), pedagogical atmosphere in the clinical area ($r_s = 0.379, p < 0.001$), the leadership style of the ward manager ($r_s = 0.340, p < 0.001$), the premises of nursing in the ward environment ($r_s = 0.501, p < 0.001$), and the students' satisfaction with their clinical rotation experience.

Conclusion. These findings provide nurse educators and clinicians with meaningful understanding about areas to prioritise when planning clinical learning opportunities in such a way that skills learning and practice of nursing skills are successful and satisfactory for undergraduate student nurses and midwives. (Author)

Full URL: <https://doi.org/10.1155/2021/7258485>

2021-03239

Interns - know your rights. O'Connor C (2021), World of Irish Nursing & Midwifery vol 29, no 1, February 2021, p 43

Catherine O'Connor discusses the rights and entitlements of student nurses and midwives in the workplace. (Author)

Full URL: <https://online.flippingbook.com/view/665150/42/>

2021-03227

Preparing for clinical placement. O'Connor C (2020), World of Irish Nursing & Midwifery vol 28, no 9, November 2020, p 43

Catherine O'Connor offers tips and advice to first-year students going on clinical placement for the first time. (Author)

2021-03037

Prepared and motivated to work in midwifery continuity of care? A descriptive analysis of midwifery students' perspectives. Carter J, Sidebotham M, Dietsch E (2022), Women and Birth: Journal of the Australian College of Midwives vol 35, no 2, March 2022, pp 160-171

Background

Internationally, midwifery education and maternity services are evolving to promote midwifery continuity of care. It is unclear whether current Australian midwifery education programs are graduating a midwifery workforce prepared and motivated to work in this way.

Aim

To discover how well midwifery students in Australia feel they have been prepared and motivated to work in midwifery continuity of care when they enter practice.

Methods

A pragmatist approach was used. Participants were final year midwifery students at one Australian university participating in the Midwifery Student Evaluation of Practice (MidSTEP) project over three consecutive years. Descriptive analysis of selected scaled and free text responses was undertaken to ascertain how students' clinical practice experiences had influenced their learning, development and career aspirations.


Results

Exposure to midwifery continuity of care had profound impact on students' learning, enabling them to provide woman-centred midwifery care whilst increasing confidence and preparedness for practice. The majority were motivated to work in midwifery continuity of care upon graduation. A small minority of participants felt unprepared to work in midwifery continuity of care, attributing this to their family commitments, a sense of needing more experience or unsupportive workplace cultures.


Summary

Midwifery continuity of care experiences are highly valued by midwifery students and positively influence confidence, preparation and motivation for beginning practice. It is necessary to review education standards to ensure quality, consistency, and adequacy of these experiences throughout pre-registration midwifery education. This will assist in generating a midwifery workforce prepared and motivated to deliver the goals of maternity service reform.

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2021-02139

A change will do you good!: exploring pre-midwifery careers. McWha K, Mitchell G, Silverwood-Cope O (2021), The Student Midwife vol 4, no 2, April 2021, pp 29-32

Some people have childhood aspirations to become midwives, while others become interested in midwifery as a second, third or even fourth career - it is never too late to train as a midwife. Previous career experiences can make your midwifery training application stand out and positively shape your practice as a qualified midwife. In this uplifting article, two registered midwives and a student midwife describe what led them to pursue midwifery after successful careers as a head of English, singer and copywriter, and explain how their previous occupations have prepared them to enter the midwifery profession. (Author)

2021-02130

Gender identity: student midwifery beyond the binary. Bainbridge A, March R (2021), The Student Midwife vol 4, no 2, April 2021, pp 18-21

In this commentary, Ash Bainbridge and Rowan March share their experiences of midwifery training as gender non-conforming people. They shed light on how healthcare students and professionals can improve the experiences of their gender non-conforming colleagues and discuss the importance of inclusive language. (Author, edited)

2021-02085

Simulated employment interviews: A collaborative approach to gaining understanding of the graduate midwife employment process. Sidebotham M, Walters C, Baird K, et al (2020), Women and Birth: Journal of the Australian College of Midwives Vol 33, no 5, September 2020, pp 455-463

Graduating midwives unsuccessful in gaining employment in their preferred model/location; or finding a job within a year of graduation are more likely to leave the profession. Obtaining post-graduate midwifery employment is competitive with midwifery students needing to confidently sell themselves to potential employers. Whilst midwifery students may be prepared with the requisite midwifery skills and knowledge, there is no guarantee of attaining a midwifery position upon graduation. Increasingly employers are requiring 'soft skills' including communication, teamwork, reflexivity and personal attributes of the individual to be able to effectively respond within different contexts. Demonstrating these skills within an employment interview requires confidence and knowledge in how to prepare. Designed with health service partners, simulated employment interviews were introduced into the final year of a Bachelor of Midwifery program as part of a suite of employability strategies connected to the student lifecycle. An exploratory evaluation study of students' experiences of a simulated employment interview was undertaken. The simulated interview emulated real employment interviews with students receiving immediate written and oral feedback. Evaluation through surveys, focus groups and individual interviews provided rich data around the effectiveness of this approach. Students, health service partners and academics found the simulated employment interview provided a valuable learning experience, assisting students to reflect, explore and further develop skills sought by employers. Collaboration with health service partners created an authentic process enabling students to receive feedback relevant to the real world of practice. Students were able to work through anxiety, gain confidence and exposure to employers in preparation for employment interviews.

2021-01477

Midwifery students experience of continuity of care: A mixed methods study. Foster W, Sweet L, Graham MK (2021), Midwifery vol 98, July 2021, 102966

Background

Continuity of Care Experiences are a mandated component of Australian midwifery programs leading to registration. Despite research evidence of the benefits of Continuity of Care Experiences for student learning and for women, there is limited evidence on the personal impact of this experience to students. Additionally, there is limited

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guidance on how to best support students to successfully complete this valuable component of their program.

Objective

To identify the emotional, psychological, social and financial costs of undertaking the Continuity of Care Experience component of a midwifery program and to provide information which may lead to educational strategies within CoCE aimed to improve student support and alleviate challenges.

Design

Using surveys and diary entries, a convergent parallel mixed methods approach was used to collect qualitative and quantitative data concurrently. Descriptive statistics were used to analyse financial cost, and clinical, travel and wait times. A constant comparative analysis was used for qualitative data about student's Continuity of Care Experiences. Integrative analysis was used to reconstruct the two forms of data.

Setting

Two Australian universities offering Bachelor of Midwifery programs.

Participants

Seventy students completed the demographic survey and 12 students submitted 74 diaries describing 518 episodes of care. There was a response rate of 18% recorded.

Findings

Analysis identified four themes: perception of Continuity of Care Experiences; personal safety; impact on self and family; and professional relationships. The mean time spent per completed experience was 22.20 hours and the mean cost was \$367.19. Although students found Continuity of Care Experiences to be a valuable learning experience, they identified numerous factors including time, money, and personal circumstances that impacted on their ability to successfully meet the requirements.

Implications for practice

Continuity of Care Experiences are a highly valuable, but often challenging component of midwifery education in Australia. Using a model of social interdependence, students, educators and maternity care providers may engage better with the process and philosophies of CoCE. (Author)

20210126-6*

Nursing and Midwifery Students [written answer]. Northern Ireland Assembly (2020), Hansard Written question AQW 12934/17-22, 30 December 2020

The Minister of Health responds to a written question asked by Mr Pat Sheehan regarding whether he will offer final year nursing and midwifery students the opportunity to complete their clinical placements as paid members of staff, as set out in the emergency standards reintroduced by the Nursing and Midwifery Council, in response to the ongoing COVID-19 crisis in our hospitals. (MB)

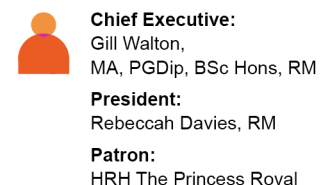
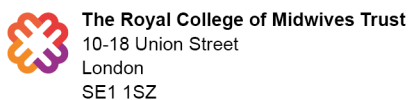
Full URL: <http://aims.niassembly.gov.uk/questions/search.aspx>

20210112-23*

Tricks and tales: midwifery students' experiences of organising a midwifery conference. Merton V, Guerin A, Geraghty S (2021), *The Student Midwife* vol 4, no 1, January 2021, pp 29-32

Student midwives are increasingly taking the initiative to organise and host conferences with impressive results. This article celebrates the creativity and leadership of Veronica Merton, Ashlee Guerin, Kate Gee, Mia Pemble and Shannon Minnett, newly qualified midwives who, with the assistance of midwifery professor Sadie Geraghty, arranged and facilitated a midwifery conference when they were students at Charles Darwin University. (Author)

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20210112-22*

New midwives and the new normal. Scicluna B (2021), *The Student Midwife* vol 4, no 1, January 2021, pp 24-27

Ever since I was a young girl, I knew I wanted to work in a caring profession. When I went to university for the first time, I undertook a Bachelor of Science in Physiotherapy; at the time, ballet was a big part of my life, and I felt that physiotherapy perfectly aligned with my passion for dance and caring for others. However, a few months into the course, I started to realise that something was not quite right - something was missing. That something turned out to be midwifery! Becoming a midwife during the global COVID-19 pandemic was uniquely challenging, but allowed me to view the world differently. Here are the lessons I have learnt that will make me a better midwife. (Author)

20210112-20*

Leading the way: student innovation in Malawi. Chigwede M (2021), *The Student Midwife* vol 4, no 1, January 2021, p 17

Malawian student nurse-midwife Martin Chigwede reflects upon the innovative intervention he developed to prepare his community for the arrival of COVID-19, and ends his reflection by challenging students to embrace leadership roles and innovation during these unprecedented times. (Author)

2021-01020

Student experiences of COVID. Wilson C, Lloyd C (2021), *Midwives* vol 24, March 2021, pp 38-42

The RCM made safeguarding education a priority during the pandemic - RCM policy advisor Charlotte Wilson and head of education and learning Carmel Lloyd explain why. (Author)

2021-01016

Bags of kindness. Anon (2021), *Midwives* vol 24, March 2021, p 31

Feeling sympathy for women on the wards during the pandemic without their partners, the Cardiff University Midwifery Society organised gift bag donations to spread a little love. (Author)

2021-00920

Supporting the future of midwifery. Meen A (2021), *British Journal of Midwifery* vol 29, no 3, March 2021, pp 126-127

Aimi Meen conducts an analysis on the quality of support student midwives receive in clinical practice. (Author)

2021-00523

Creating a partnership of care in clinical practice: a student midwife's reflection. Rajan-Brown N (2021), *MIDIRS Midwifery Digest* vol 31, no 1, March 2021, pp 58-60

Advocacy is a mainstay of midwifery practice, ensuring women's needs are met holistically. This reflection explores the mother-midwife relationship, discussing the fine balance between empowering self-efficacy, while advocating on women's behalf where necessary. Student midwives must also learn to develop advocacy skills, being mindful of the impact of the student-mentor relationship on practice. (Author, edited)

2021-00458

Learning to be a midwife: Midwifery students' experiences of an extended placement within a midwifery group practice. Baird K, Hastie CR, Stanton P, et al (2022), *Women and Birth: Journal of the Australian College of Midwives* vol 35, no 1, February 2022, pp e19-e27

Aim

To investigate the experiences, perspectives and plans of students who had a six-month placement with the midwifery group practice.

Methods

Focus groups were conducted with fifteen third – year Bachelor of Midwifery students who had undertaken an

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extended placement at a midwifery group practice in a large tertiary referral hospital in Queensland, Australia.

Results

Four main themes were identified in the data: Expectations of the Placement; Facilitating learning within a midwifery group practice model; Transitioning between models of care and Philosophy and culture of midwifery group practice.

Discussion and conclusion

Third-year midwifery students valued the experience of working one-on-one for an extended placement with a midwife providing continuity of care within a caseload model. The experience was the highlight of their degree and they learned 'how to be a midwife'. Most students found reintegrating back into the hospital system of care challenging, reporting that their developed skills of supporting women holistically and facilitating normal birth were not fully utilised when returning to the task-orientated birth suite. Students valued thoughtful, kind and supportive midwifery preceptors who supported them to transition back into the hospital.

Implications and recommendations

Undertaking an extended placement within a midwifery group practice provides students with a rich and holistic learning experience and helps them develop a sense of professional identity. Student placements situated within models of care which provide continuity of midwifery care should be proactively enabled by health services and universities. Research of the longer-term impacts of an extended midwifery group practice clinical placement on midwifery graduates' capabilities and competencies 3–5 years post registration should be conducted. (Author)

2021-00280

Midwifery students' perceptions of the modifiable organisational factors that foster bullying behaviours whilst on clinical placement. A qualitative descriptive study. Capper TS, Muurlink OT, Williamson MJ (2021), Women and Birth: Journal of the Australian College of Midwives vol 34, no 6, November 2021, pp e608-e615

Problem

An increasing body of research suggests midwifery students experience bullying and harassment whilst on clinical placement. Little is known, however, about factors that foster bullying within this context and how they may be addressed.

Aim

To explore and describe midwifery students' perceptions of what modifiable organisational factors foster bullying behaviours and to map the identified factors against the students' perceptions of a solution.

Methods

A qualitative descriptive design was used. A total of 120 midwifery students from the United Kingdom and Australia participated in this study. Participants completed an online qualitative survey and data was thematically analysed.

Findings

The midwifery students in this study perceive that several organisational factors exist that help foster bullying behaviours towards them whilst undertaking clinical placement. Three overarching themes were identified relating to ineffective midwifery mentorship, the high stress environment of the maternity unit, and challenges faced with transparency and whistleblowing. Students identified a range of potential structural responses to bullying.

Conclusions

Recommendations are made that midwifery managers and academics acknowledge how students perceive several potentially modifiable organisational factors which either lead to or exacerbate the likelihood of them being the target of bullying whilst on clinical placement. Consideration should be given to solutions that from the student's perspective may help tackle bullying and subsequently lead to fewer students leaving midwifery education and further depleting the future workforce. (Author)

2021-00136

The relationship between COVID-19 knowledge levels and anxiety states of midwifery students during the outbreak: A cross-sectional web-based survey. Sogut E, Dolu I, Cangöl E (2021), Perspectives in Psychiatric Care vol 57, no 1, January 2021

Purpose: To determine the relationship between the anxiety states and knowledge levels of female midwifery students about COVID-19 during the outbreak.

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Design and methods: This cross-sectional study carried out with online participation of 972 female midwifery students.

Findings: The anxiety levels of the female midwifery students were high among those visiting the hospital during the pandemic and having parents or relatives who had chronic diseases. Female midwifery students had a high level of knowledge regarding COVID-19.

Practice implications: Female midwives of the future will take part in primary health care services in the protection and promotion of health as an important occupational group in the public health system. To determine mental health and psychological needs of them during the outbreak will greatly contribute to the pandemic management process.

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2021-00104

Financial support for students [written answer]. Northern Ireland Assembly (2021), Hansard Written question AQW 13072/17-22, 20 January 2021

The Minister of Health responds to a written question asked by Ms Liz Kimmins regarding whether there are plans to increase financial support for students who are currently on placement within the health service and subsequently working on the frontline during the COVID-19 pandemic. (MB)

Full URL: <http://aims.niassembly.gov.uk/questions/printquestionssummary.aspx?docid=323271>

2021-00094

Student midwives' knowledge, skills and competency in relation to the active management of the third stage of labour: A correlational study. Muzeya F, Julie D (2020), Curationis vol 43, no 1, 15 June 2020, a2054

Background: Lesotho has been experiencing health challenges as indicated by its high maternal mortality ratio of 620 per 100 000 live births for the year 2010, which has been linked to its limited human resources.

Objectives: The knowledge and skills of final-year student nurse-midwives related to the active management of the third stage of labour were determined.

Method: A quantitative, descriptive survey design was used to conduct this study with 99 final-year midwifery students at four nursing schools in Lesotho using stratified sampling. The structured questionnaire collected data on the knowledge and self-reported competency. Subsequently, the controlled cord traction marks, extracted from the objective structured clinical examination (OSCE), were compared to the self-reported competency of these midwifery students using R software version 3.4.0.

Results: The mean score for knowledge and the OSCE was 73.8% (n = 99) and 77.2% (n = 99), respectively. The majority of respondents (95.2%, n = 99) rated themselves highly in terms of the active management of the third stage of labour competency. There was no correlation between the self-reported competency and knowledge ($r = 0.08$, $p = 0.4402$), and self-reported competency and OSCE scores ($r = -0.004$, $p = 0.01$).

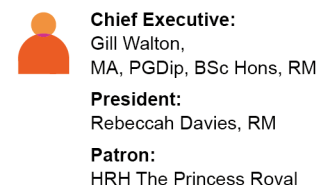
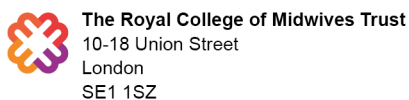
Conclusion: The high mean scores for the knowledge and the OSCE indicate that the theoretical component of the curriculum on the active management of the third stage of labour was effective in equipping final-year midwifery students with knowledge and skills to carry out this competency. (Author)

Full URL: <https://doi.org/10.4102/curationis.v43i1.2054>

2021-00025

Racism matters: 6. This hurts us much more than it hurts you: the lived experiences of Black, Asian and multi-racial student midwives. Burnett A (2021), The Practising Midwife vol 24, no 2, February 2021, pp 12-15

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Student midwife Alicia Burnett presents the lived experiences of Black, Asian and multi-racial student midwives from Scotland, Wales, the Republic of Ireland and England in an attempt to foreground the most important voices in these ongoing conversations. (Author, edited)

20201218-39*

Why Erasmus matters. Coates C (2020), British Journal of Midwifery vol 28, no 12, December 2020, pp 858-859

Broadening perspectives on other healthcare systems and approaches to woman-centred care can only benefit the UK's midwifery workforce, Chloe Coates writes. (Author)

20201218-35*

An exploration of the perceptions of student midwives about midwifery education related to abortion. Myerscough C, Briscoe L (2020), British Journal of Midwifery vol 28, no 12, December 2020, pp 822-828

Background

There is variation in undergraduate curriculum content related to abortion, both nationally and internationally.

Aims

To explore how student midwives perceived education related to abortion within a midwifery curriculum.

Methods

A qualitative exploratory survey design used an anonymised questionnaire to capture the perception of 60 student midwives on education related to abortion. Frequency, distribution and themes generated were synthesised using framework analysis.

Results

A total of 45 students responded. Overall, 16 were in first year, 15 were in second year and 14 were third year students. Of those who had received education about abortion, only five (2.25%) expressed that their learning needs about the topic had been met. A total of 40% (18) had cared for women seeking abortion while in clinical placement. There were two overarching themes that were identified: education and values.

Conclusions

The theory of abortion did not prepare the students for practice. Standardised midwifery content is required, covering definition, process, and legal aspects of care around abortion, on international, national and local levels. Empathy was enhanced by exposure to theory or practice and a safe, reflective, educational space is essential to explore how perceptions change after exposure to the topic. (Author)

20201026-64*

Midwifery students' views and experiences of birth on mainstream factual television. Roberts J, Bennett B, Slack H, et al (2021), Midwifery vol 92, January 2021, 102859

Objectives

: To investigate midwifery students' experiences of viewing childbirth on mainstream factual television and to explore implications for student career intentions and potential pedagogical uses of television excerpts in midwifery education.

Design

: Twenty-two undergraduate midwifery students at one of two universities took place in focus groups between February and June 2019. Ethical approval was obtained at both sites. Thematic analysis was employed to generate key themes from the data.

Setting

: Two UK universities based in the East Midlands and East Yorkshire regions of England.

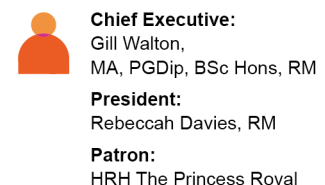
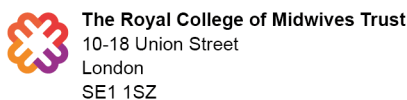
Participants

: Twenty-two midwifery students at any stage of their studies.

Findings

: Researchers generated four key themes from the data a) Changed Perspectives on Televised Childbirth, b)

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Representations of Midwives and Social Implications, c) Representation of Childbirth and Social Implications and d) The Role of Televising Childbirth in Midwifery Education.

Key conclusions

: Midwifery students often experience a change of perspective on birth on television as they acquire new knowledge and skills. They recognise the potential social implications of how childbirth and midwifery are represented on television. Pedagogical use of televised birth has potential benefits but needs further investigation in the context of midwifery education.

Implications for practice

: Midwifery students are likely to begin their studies with pre-existing views and experiences around how birth is represented on mainstream factual television. They may need support to reflect on these to consider their expectations of the profession, to effectively support childbearing women and to potentially influence future production of media images of childbirth. (Author)

Full URL: <https://doi.org/10.1016/j.midw.2020.102859>

20201015-35*

Recognising white privilege: moving towards anti-racism as a student midwife. Saifeldeen L (2020), The Student Midwife vol 3, no 4, October 2020, pp 7-10

This article explores the complex issue of racism within midwifery practice and highlights the needs for students and midwives to work towards anti-racism. Laila Saifeldeen reflects upon her experiences as a white-presenting, mixed-race student midwife and the privileges she is afforded because of her racial identity. In particular, she examines the impact of racial prejudice upon an interaction between a midwife and client and explores how her presence affected their rapport. (Author)

20201007-8*

Advice for first year students. O'Connor C (2020), World of Irish Nursing & Midwifery vol 28, no 7, September 2020, p 45

Catherine O'Connor shares advice with incoming first year nursing and midwifery students joining the INMO. (Author)

Full URL: <https://online.flippingbook.com/view/166730/44/>

20200902-55*

A survey of student nurses' and midwives' experiences of learning to use electronic health record systems in practice. Baillie L, Chadwick S, Mann R, et al (2013), Nurse Education in Practice vol 13, no 5, September 2013, pp 437-441

Aim: The study aimed to investigate student nurses' and midwives' experiences of learning to use electronic health records (EHR) in practice.

Background: Good record keeping and documentation are integral to nursing and midwifery practice. As EHRs become more widespread, student nurses and midwives need opportunities to access and learn how to use them in practice.

Method: A survey of nursing and midwifery students was conducted using questionnaires (n = 215) and three focus groups: one with midwifery students (n = 6); one with mental health nursing students (n = 5) and one with adult nursing students (n = 6). The University research ethics committee approved the study. The questionnaire data were analysed using SPSS v19. The focus group data were analysed thematically following transcription.

Results: The results presented relate to two themes: 1) Preparation for using EHRs and skills development; 2) Access to EHRs and involvement. Students had variable experiences in relation to opportunities to access and use EHRs, training on EHR systems used in practice and guidance from mentors. Some mentors had concerns about students' legitimacy to access EHRs and verification of students' EHR entries was a challenging issue in some areas.

Conclusion: To promote opportunities for students to develop competence in using EHRs in practice, training on EHR systems in use, and clear processes for authorised access, are needed. Following the survey, the University and practice partners collaboratively established formalised EHR training for students with clear governance procedures for access and use. (Author)

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20200826-8*

'The rollercoaster': A qualitative study of midwifery students' experiences affecting their mental wellbeing. Oates J, Topping A, Watts K, et al (2020), Midwifery vol 88, September 2020, 102735

Objective

Midwifery student mental wellbeing is an important consideration for the sustainability of the profession, however it has seldom been the subject of empirical research. Previous studies of the lived experience of midwifery students have focused on the impact of transition experiences and student satisfaction, rather than specifically on mental health and students' views on support for their mental wellbeing.

Design

A qualitative descriptive study using semi-structured interviews.

Setting

A midwifery undergraduate programme in one university in the South of England.

Participants

20 BSc midwifery students.

Findings

Two inductive themes were developed from our analysis. The theme of 'the rollercoaster' encapsulated students' experience over the length of the course, characterised by multiple culture shocks of being in different worlds, from one clinical placement to the next, from university to clinical placement. This experience was emotionally taxing. The theme of 'being noticed, feeling connected' encapsulated midwifery students' views on what could help them enjoy their training. They wanted to be seen as individuals by at least one educator, they wanted opportunities to connect with their peers and they wanted the support available to them to be consistent.

Conclusions

Listening to students' insights into the lived experience of being a midwifery student can enable midwifery educators to improve the way courses are designed and support structures are put in place. The importance of having consistent contact with peers and educators cannot be underestimated.

Implications for practice

The emotional demands of midwifery training must be acknowledged. Educators should identify ways in which they can provide students with consistent individualised support and regular opportunities to meet with their peers.

(Author)

20200826-30*

Midwifery students' experiences of bullying and workplace violence: A systematic review.. Capper T, Muurlink O, Williamson M (2020), Midwifery vol 90, November 2020, 102819

Background

Workplace violence directed at registered midwives in the maternity setting has been a recognised issue since the early 1990s. More recently it has become evident that midwifery students are also victims of bullying and harassment whilst on clinical placement. Due to the short and long-term impacts this has on students, it is likely to have a detrimental effect on the future and sustainability of the midwifery profession. As a basis for designing a response, it is important to understand what is currently known about this phenomenon.

Aim

To systematically review the literature to identify what is known about workplace violence and bullying experienced by midwifery students whilst on clinical placement.

Method

Reporting of this review followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. A search was undertaken of all primary research that focussed upon workplace violence and bullying involving midwifery students whilst on clinical placement, published between January 1990 and December 2019. Pre-defined terms were used to search the following five databases: CINAHL, Web of Science, MEDLINE, Embase, supplemented with Google Scholar. Additional manual searches of reference lists were conducted. An assessment of the quality of each eligible study was then undertaken using an appropriate mixed methods appraisal tool (MMAT).

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Extracted data were then synthesised using thematic synthesis.

Findings

Nine articles met the criteria for inclusion in the review. Studies were primarily qualitative, with some reporting descriptive statistics that do not enable key issues such as prevalence to be reliably addressed. The synthesis identified four main themes that related to workplace violence and bullying of midwifery students whilst on clinical placement. Results were clustered around the role of power in bullying, prevalence and impacts, the culture of compliance, and the victim's response.

Conclusions and Implications for Practice

A broader understanding of the nature of workplace violence and bullying and how it manifests itself is beginning to emerge, but more and higher quality research is required to establish an empirical base on which to design interventions. Studies suggest that bullying is common and has significant impacts at both a personal and professional level. This strongly reinforces a need for greater policy and organisational responses to bullying in the clinical education context, in order to break the bullying cycle and ensure the midwives of the future remain in the profession and sustain the workforce. (Author)

20200818-20*

Graduating midwifery students' preferred model of practice and first job decisions: A qualitative study. Kuliukas L, Bayes S, Geraghty S, et al (2021), *Women and Birth: Journal of the Australian College of Midwives* vol 34, no 1, February 2021, pp 61-68

Objectives

To explore and describe the preferred model of practice and first job decisions of final stage midwifery students from three Western Australian universities.

Design

Qualitative descriptive.

Setting

Three Western Australian (WA) universities offering courses leading to registration as a midwife.

Participants

Twenty-seven midwifery students from undergraduate and postgraduate (pre-registration) courses.

Methods

Data were collected from recorded interviews and focus groups. Thematic analysis of interview transcripts was used to identify commonalities. Data saturation guided when recruitment ceased and final sample size was achieved.

Findings

Participants' preferred model of maternity care was influenced by learning about and witnessing both autonomous midwifery practice and collaborative care during their studies. The greatest influence was clinical experience, with most preferring a continuity of midwifery model (CoM) but first consolidating their practice in a public hospital. Most students reported that they would not choose a private hospital as their first option. Work/life balance was also considered, with some accepting that family commitments and a need to work close to home may prevent them from choosing a CoM model.

Conclusion and implications

Although many Australian midwifery students start their midwifery course with preconceived ideology of their eventual workplace, the influences of their educators, clinical placement environment, preceptors and continuity of care experience relationships with women helped determine their final direction. To provide students with the experiences to become woman-centred autonomous practitioners it is important for universities and all maternity care providers to carefully consider their responsibility in how they influence midwifery students in education and practice. (Author)

Full URL: <https://doi.org/10.1016/j.wombi.2020.07.005>

20200804-49*

'Midwifery is about the celebration of new life, but it is also about loss'. Buddingwood L (2020), *Nursing Times* 10 March 2020

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As I sit writing this I have just finished bleeding following a miscarriage. Nearly two weeks ago I found out I was pregnant for the first time, then six days later I started to bleed. (Author)

20200804-48*

'We have stood up in a global health crisis and put women and children first'. Buddingwood L (2020), Nursing Times 9 June 2020

When I last wrote a blog, I mentioned how uncertain it was to be a third year in the final six months of a midwifery programme (or indeed; anyone, anywhere on a midwifery programme). (Author)

20200804-46*

'Are we seeing the changes we want to see in maternity service provision?'. Buddingwood L (2020), Nursing Times 24 July 2020

This constitutes my last blog for the Student Nursing Times as midwifery editor. In a few short months I will have finished the programme and my portfolio will be sent to the Nursing and Midwifery Council for consideration on the register. (Author)

20200804-45*

'It is uncertain times for a student midwife'. Buddingwood L (2020), Nursing Times 28 April 2020

I have just come to the end of a caseholding placement on my midwifery degree. (Author)

20200803-17*

Student nurses and midwives commended for contribution during pandemic. Northern Ireland Assembly (2020), Belfast: Department of Health, Social Services and Public Safety 3 August 2020

Reports that the Northern Ireland Health Minister, Robin Swann, has thanked nursing and midwifery students for their response to the COVID-19 pandemic. Almost 1400 second or final year nursing and midwifery students from universities across Northern Ireland have taken up a paid role since April, to support existing health services which were under pressure during the current pandemic. (JSM)

Full URL: <https://www.health-ni.gov.uk/news/student-nurses-and-midwives-commended-contribution-during-pandemic>

20200710-24*

Validation of the MidACE tool - Students' perceptions of the Midwifery Academic role in clinical environments.

Griffiths M, Creedy DK, Carter AG (2021), Women and Birth: Journal of the Australian College of Midwives vol 34, no 1, February 2021, pp e14-e22

Background

Situating Midwifery Academics in clinical environments can have an important impact on students' clinical learning. Students' perceptions of this support role in the clinical environment using standardised measures has been under-investigated.

Aims

To develop and test a tool that measures midwifery students' perceptions of the Midwifery Academic role on clinical learning and development of professional knowledge, skills and clinical capability.

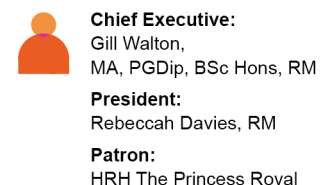
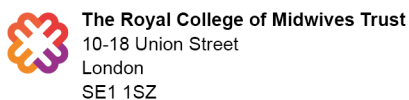
Methods

A staged process for tool development included draft item generation, review by expert panel for face and content validity and pilot testing with a convenience sample of undergraduate midwifery students. Dimensionality, internal consistency and test-retest reliability were evaluated.

Results

Two hundred and seventy-nine midwifery students completed an online survey (74% response rate). Responses on the ten-item tool loaded strongly on one factor, explaining 69.6% of variance. Cronbach's alpha (0.94) and test-retest

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reliability (intraclass coefficient = .92; 95%CI .89-.95) were good. Most students agreed that the Midwifery Academic role supported the integration of midwifery theory and practice and critical self-reflection. Areas for improvement included working in partnership with preceptors; assessing students' development; and increased presence in the clinical environment.

Conclusions

This study established reliability and validity of the Midwifery Academic in Clinical Environments (MidACE) tool.

Students perceived Midwifery Academics could contribute further to their professional knowledge, skills and clinical capability through a strong collaborative presence in the clinical environment. (Author)

Full URL: <https://doi.org/10.1016/j.wombi.2020.05.007>

20200709-4*

Minding your mental health. O'Connor C (2020), World of Irish Nursing & Midwifery vol 28, no 4, May 2020, pp 36-37

Catherine O'Connor reminds student nurses and midwives that they need to look after their mental health now more than ever. (Author)

Full URL: <https://online.flippingbook.com/view/1028755/36/>

20200703-43*

Managing your internship. O'Connor C (2020), World of Irish Nursing & Midwifery vol 28, no 2, March 2020, p 43

Catherine O'Connor gives an overview of the rights and entitlements of interns in Ireland. (Author, edited)

Full URL: <https://online.flippingbook.com/view/436949/42/>

20200703-28*

Student reflections of COVID-19 from around the world. Various (2020), The Student Midwife vol 3, no 3, July 2020, pp 6-9

We can learn so much from each other by taking stock of the challenges this pandemic creates for students and newly qualified midwives around the world. We unite and celebrate our collective voice, realising our universal calling, our passion to care for birthing people and families worldwide despite the challenges coronavirus creates. These reflections provide worldview insight and are testaments to the strength and bravery of you all. (Author)

20200617-22*

From graduation to practice. Marsh A (2020), British Journal of Midwifery vol 28, no 6, June 2020, p 390

What happens after graduation? What happens during the first week on the job? Midwife Anna Marsh answers these questions. (Author)

20200617-18*

What's next after graduation?. Horne H (2020), British Journal of Midwifery vol 28, no 5, May 2020, p 282

The fear of the unknown after graduating as a midwife can be crippling. Hannah Horne shares how she broke through this wall. (Author)

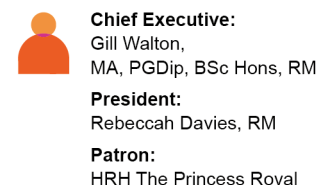
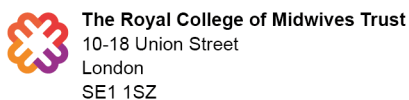
20200513-23

A reflection on the Obstetric Anal Sphincter Injury OASI Care Bundle. Hemmings A (2020), MIDIRS Midwifery Digest vol 30, no 2, June 2020, pp 211-214

Student midwife reflection of using Manual Perineal Protection (MPP) as outlined in the OASI Care Bundle. The author discusses feelings of stress and anxiety prior to the event but felt supported by working under the guidance of an OASI champion. (LDO)

20200324-29*

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Being bullied as a midwifery student: does age matter?. Capper T, Muurlink O, Williamson M (2020), British Journal of Midwifery vol 28, no 3, March 2020

Clinical placement is a compulsory component of midwifery education and a time when some midwifery students become targets of workplace bullying. An anonymous, online qualitative survey was used to collect data from two contrasting groups of purposively recruited UK and Australian midwifery students that responded to a call for experiences of bullying while on clinical placement. Participants in group were either aged between 18-21 years (n=20) or over 43 years of age (n=20). The data collected from each group was thematically analysed and compared. While younger midwifery students have an additional power disadvantage compared to their older counterparts, the pattern of bullying experience between the two groups was remarkably similar. Younger students however, experience more verbal and overt forms, and are more likely to respond passively to the experience. Results are discussed in terms of impact on individual welfare and the viability of the profession. (Author)

20200320-98*

From one drama to another. Ladkin R (2020), British Journal of Midwifery vol 28, no 3, March 2020, pp 202

Blog exploring the experience of changing careers from acting to midwifery. (Author, edited)

20200320-96*

Supporting the next generation. Ladkin R (2020), British Journal of Midwifery vol 28, no 2, February 2020, pp 134

Blog exploring explores how qualified midwives can better support their student counterparts and emphasising the importance of mentors in the student placement experience. (Author, edited)

20200320-69*

Learning to be a midwife. Ladkin R (2020), British Journal of Midwifery vol 28, no 1, January 2020, p 134

A newly-qualified midwife blogs about how it is the women she has cared for as a student midwife who have inspired and taught her the most. (CAP)

20200311-130*

The experiences of Aboriginal and Torres Strait Islander Bachelor of Midwifery students: An integrative literature

review. Coleman R, Hartz D, Dahlen H (2021), Women and Birth: Journal of the Australian College of Midwives vol 34, no 1, February 2021, pp 69-76

Issue

There is an underrepresentation of Aboriginal and Torres Strait Islander midwives across Australia and an inadequate number of graduating midwives to redress this. A major pillar for the Birthing on Country Model is maternity care workforce development.

Aim

The purpose of this review is to examine the enablers and barriers that Aboriginal students experience while undertaking the Bachelor of Midwifery degree in Australia.

Methods

A search of the literature was undertaken through electronic databases. When only three papers were found looking at the experiences of Aboriginal midwifery students the search was broadened to include Aboriginal undergraduate health students.

Findings

The literature review reported a strong need for cultural safety in both the clinical and education systems. Students with access to cultural supports, relationships with Aboriginal mentors and academics and Aboriginal clinical placements felt empowered and were able to navigate the 'two worlds' in a meaningful way.

Discussion

This review highlights a significant gap in the literature. Despite the expanded search terms to include Aboriginal health students, a relatively narrow range of papers were found. Interestingly, the combined search revealed similar

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themes: kinship, personal factors, and cultural issues.

Conclusion

Empowering and supporting Aboriginal Peoples to become midwives is essential. While systems and societies aim for cultural safety, this review shows there is still a way to go. Further research is essential to decolonise higher education and health care systems, and provide strong, well supported pathways for Aboriginal midwifery students. (Author)

Full URL: <https://doi.org/10.1016/j.wombi.2020.02.008>

20200309-40*

A community of practice in a midwifery led unit. How the culture and environment shape the learning experience of student midwives. Norris S, Murphy F (2020), Midwifery vol 86, July 2020, 102685

Objective

: to explore the teaching and learning experience of midwifery mentors and student midwives in a midwifery led unit. The aim of this paper is to discuss how a conceptual framework emerged from the findings of the study.

Design and method

: ethnography. Non- participant observation of the daily work of an alongside midwifery led unit (AMU) over 14 months, and direct observation of episodes of care involving ten dyads of midwifery mentors and student midwife dyads. These observations were followed by individual semi structured interviews with participants.

Setting

: an alongside midwifery led unit in a Health Board in Wales, UK. This is an option for place of birth in the National Health Service in the UK.

Sample

: ten dyads of midwifery mentors and student midwives.

Findings

: a conceptual framework emerged from the data in relation to the powerfully shared goals and ethos of the midwives working in this AMU. The framework gave shape and form to the particular nature of the teaching and learning experience in the midwifery led setting. The concept of a community of practice, firmly rooted in the authoritative knowledge and understanding of physiological birth, resulted in positive working practices and happy, motivated midwives who enhanced the birth experience for women. This supported the clinical and socially situated learning of student midwives and new colleagues through legitimate peripheral participation.

Implications for practice, policy, education and research

: Positive, committed and autonomous midwives make for a nurturing working environment and may therefore enhance the experience of birthing women. Midwives need to be able to work in an environment and community of practice which mirrors their own philosophy of care to promote professional wellbeing, and to develop the expert knowledge and skill in that area of practice over time. (61 references) (Author)

20200305-40*

Aspirations part 3. Kirk L (2019), The Student Midwife vol 2, no 3, July 2019, p 7

Hello and welcome. This is the final article of this three-part Aspirations Series. Within this article we will discuss how you can best prepare to commence a midwifery programme and those first few weeks of the course. Hopefully this will provide you with some guidance to aid you through your journey. (Author)

20200305-36*

Surviving as a student midwife with dyslexia. Slater L, Braime E (2019), The Student Midwife vol 2, no 2, April 2019, pp 20-21

This article explores issues from the perspective of student midwives with dyslexia and includes strategies to adapt and overcome some of the challenges in both academic work and busy clinical practice. (Author, edited)

20200305-32*

Aspirations part 2. Kirk L (2019), The Student Midwife vol 2, no 2, April 2019, p 19

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Hello and welcome everyone. This is the second article of three in this Aspirations Series. Within this article I will discuss writing a personal statement and explore how you can prepare for interviews. Hopefully this will provide you with some guidance to aid you through your journey applying for a midwifery degree programme. (Author)

20200305-24*

Aspirations part 1. Kirk L (2019), *The Student Midwife* vol 2, no 1, January 2019, p 6

In this first article of the series, we discuss the importance of research before completing your application, and of open days. The second article will examine the personal statement and preparation for interview. The final article will then aid you in preparing to start your midwifery course. (Author, edited)

20200305-109*

Special Report from the UK. Hawkins B, Whincop R (2020), *The Student Midwife* vol 3, no 1, January 2020, pp 24-26

Student midwives Beth Hawkins and Ruth Whincop from the University of West England have launched Campaign SOS (SaveOurStudents). In this article, they explain the impact of removing the bursary, concerning reduced workforce numbers, poor retention rates, and increased poverty, and of course, what you can do to help. (Author, edited)

20200304-79*

Developing leadership skills as a student midwife. Whitaker P, Kirk L (2018), *The Student Midwife* vol 1, no 1, October 2018, pp 8-11

As a student midwife, Philippa is passionate about supporting evidence-based changes within practice to benefit women and families. This article reflects upon her experience on the student leadership programme run by the Council of Deans. The leadership qualities Philippa started to learn and develop as a result of this course were very valuable: skills such as emotional intelligence, resilience as a leader and how to implement change. She was able to begin to gain knowledge and understanding of what contributes towards a good leader, therefore this article reflects upon her experience, along with providing tips for others to develop their leadership skills.

As her academic advisor, Leah supported Philippa in applying for this programme, and in writing this article for other student midwives, to aid their learning and advance their leadership skills. (Author)

20200217-8*

Preparing midwifery students to consult confidently. Patterson J, Miller S, Kerkin B, et al (2021), *Women and Birth: Journal of the Australian College of Midwives* vol 34, no 1, February 2021, pp 105-110

New graduate midwives can be challenged and lack confidence when engaging in interprofessional collaboration and conversations. This discussion paper was prompted by responses in the comment section of a previous online survey we completed in 2017 of 42 midwives who had graduated between 2011 and 2014 from our New Zealand midwifery school [1]. This survey was discipline specific and did not form part of our usual school evaluation processes. The aim of the survey was to ascertain what aspects of the midwives' undergraduate programme they believed had prepared them well for practice, and what aspects could be improved for future graduates. (44 references) (Author)

Full URL: <https://doi.org/10.1016/j.wombi.2020.02.005>

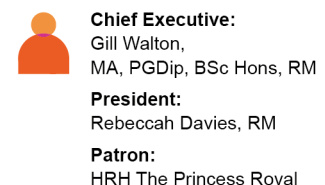
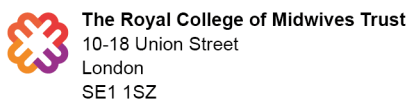
20200217-17

In the wilderness: an action-research study to explore the transition from student to newly qualified midwife. Norris S (2019), *Evidence Based Midwifery* vol 17, no 4, December 2019, pp 128-134

Background. This study, funded by the RCM Ruth Davies Award, explores the experiences of newly qualified midwives (NQMs) in practice. A review of the literature revealed that the experiences of professional healthcare students moving into their qualified status can be uncomfortable, stressful and, for some, traumatic.

Aim. The aim of the study was to explore the experience of NQMs in an identified area and to evaluate a preceptorship programme in Wales.

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Method. The research design was based on a qualitative action-research approach. Action research, using focus groups, was chosen to gain a greater understanding of the experiences of the midwives in a participatory way, whereby they were involved actively in the data collection, data analysis and conclusions drawn, which informed the recommendations for future practice. Reflective diaries were also used to gather additional data. The objectives were to explore the context and experience of practice and to gain an understanding of what constitutes a supportive preceptorship programme. Following ethical approval, 30 NQMs in one maternity unit were approached during their induction programme to participate in a series of three focus groups. Thematic analysis was used to identify key themes from the transcripts of audio recordings of each focus group. These were then fed back to the participants in each subsequent focus group where they were invited to comment and provide further clarification, which led to further discussion and the development of recommendations. Additional participants were then recruited to form a secondary focus group that considered and validated the recommendations of the primary group.

Findings. The key themes that were identified were fed back to the participants in a final workshop and the participants used these to develop recommendations for practice. These themes were as follows: 'Early days', 'A time of transition', 'Relationships with colleagues', 'Relationships with women', and 'A new beginning'. Overall, the findings of the study resonated with themes from the literature, highlighting that the participants' emotional responses to their experiences were comparable in different organisations and usually dependent on familiarity and acceptance within the environment, the quality of relationships with professional colleagues, and women's confidence in them. Participants recognised the need to develop inner strength and confidence in themselves. The recommendations that they developed reflected this.

Conclusion. The NQMs' responses resonate with theories of rites of passage and transition. In the process of change from one status to another there are emotional consequences and loss of performance. The recommendations from the findings suggest ways in which support in this preceptorship period could be improved. (Author)

20200217-14*

Optimising the continuity experiences of student midwives: an integrative review. Moncrieff G, MacVicar S, Norris G, et al (2021), *Women and Birth: Journal of the Australian College of Midwives* vol 34, no 1, February 2021, pp 77-86

Background

In several countries, midwifery students undertake continuity of care experiences as part of their pre-registration education. This is thought to enable the development of a woman-centred approach, as well as providing students with the skills to work in continuity models. A comprehensive overview of factors that may promote optimal learning within continuity experiences is lacking.

Aim

To identify barriers and facilitators to optimal learning within continuity experiences, in order to provide a holistic overview of factors that may impact on, modify and determine learning within this educational model.

Methods

An integrative literature review was undertaken using a five-step framework which established the search strategy, screening and eligibility assessment, and data evaluation processes. Quality of included literature was critically appraised and extracted data were analysed thematically.

Findings

Three key themes were identified. A central theme was relationships, which are instrumental in learning within continuity experiences. Conflict or coherence represents the different models of care in which the continuity experience is situated, which may conflict with or cohere to the intentions of this educational model. The final theme is setting the standards, which emerged from the lack of evidence and guidance to inform the implementation of student placements within continuity experiences.

Conclusion

The learning from continuity experiences must be optimised to prepare students to be confident, competent and enthusiastic to work in continuity models, ultimately at the point of graduation. This will require an evidence-based approach to inform clear guidance around the intent, implementation, documentation and assessment of continuity experiences. (48 references) (Author)

Full URL: <https://doi.org/10.1016/j.wombi.2020.01.007>

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20200214-13

A summary of a phenomenographic doctoral study: third year midwifery students' views and experiences of telling and listening to practice related stories. Weston R (2019), *The Practising Midwife* vol 22, no 11, December 2019, pp 27-30

From time immemorial, midwives have shared stories with students and women. Oral storytelling connects communities and strengthens relationships. This paper presents a summary of a doctoral study that asked: What are final year midwifery students' views and experiences of telling and listening to practice-related stories? It found that on their journeys to becoming midwives, stories and storytelling engage midwifery students in deep transformative learning. In the light of the Nursing and Midwifery Council's (NMC) Future Midwife Standards (2019), the findings and recommendations will be of interest to midwifery educationalists developing new curricula, along with students, practice supervisors and assessors. (Author)

20200213-16

Learning from communication errors when transitioning from nursing to midwifery: a student midwife's reflection.

Wakefield C (2020), *MIDIRS Midwifery Digest* vol 30, no 1, March 2020, pp 40-42

Charlotte Wakefield reflects on her first shift as a student midwife at a birth centre and explores her communication skills, heightened emotions and feelings of incompetence. (14 references) (LDO)

20200129-36*

The Exploring Student Midwives' Experiences (ESME) project - NSW. Stulz V, Dewar B, Cross J (2019), *Australian Nursing and Midwifery Journal* vol 26, no 8, October-December 2019, p 44

Provides an overview of the Exploring Student Midwives' Experiences (ESME) project, a body of work to help improve the experiences of student midwives in New South Wales, Australia. (2 references) (JSM)

Full URL: https://issuu.com/australiannursingfederation/docs/anmj_oct-dec_2019_issuu

20200117-5*

Development and use of a scale to assess gender differences in appraisal of mistreatment during childbirth among Ethiopian midwifery students. Bakker R, Sheferaw ED, Stekelenburg J, et al (2020), *PLoS ONE* vol 15, no 1, 16 January 2020, e0227958

Mistreatment during childbirth occurs across the globe and endangers the well-being of pregnant women and their newborns. A gender-sensitive approach to mistreatment during childbirth seems relevant in Ethiopia, given previous research among Ethiopian midwives and patients suggesting that male midwives provide more respectful maternity care, which is possibly mediated by self-esteem and stress. This study aimed a) to develop a tool that assesses mistreatment appraisal from a provider's perspective and b) to assess gender differences in mistreatment appraisal among Ethiopian final-year midwifery students and to analyze possible mediating roles of self-esteem and stress. First, we developed a research tool (i.e. a quantitative scale) to assess mistreatment appraisal from a provider's perspective, on the basis of scientific literature and the review of seven experts regarding its relevance and comprehensiveness. Second, we utilized this scale, the so-called Mistreatment Appraisal Scale, among 390 Ethiopian final-year midwifery students to assess their mistreatment appraisal, self-esteem (using the Rosenberg Self-Esteem Scale), stress (using the Perceived Stress Scale) and various background characteristics. The scale's internal consistency was acceptable ($\alpha = .75$), corrected item-total correlations were acceptable (.24 - .56) and inter-item correlations were mostly acceptable (.07 - .63). Univariable ($B = 3.084$, 95% CI [-.005, 6.173]) and multivariable ($B = 1.867$, 95% CI [-1.472, 5.205]) regression analyses did not show significant gender differences regarding mistreatment appraisal. Mediation analyses showed that self-esteem ($a1b1 = -.030$, $p = .677$) and stress ($a2b2 = -.443$, $p = .186$) did not mediate the effect of gender on mistreatment appraisal. The scale to assess mistreatment appraisal appears to be feasible and reliable. No significant association between gender and mistreatment appraisal was observed and self-esteem and stress were not found to be mediators. Future research is needed to evaluate the scale's criterion validity and to assess determinants and consequences of mistreatment during childbirth from various perspectives.

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20200115-15*

Effectiveness of solution-focused group counseling on the mental health of midwifery students. Javid N, Ahmadi A, Mirzaei M, et al (2019), *RBGO Gynecology & Obstetrics* vol 41, no 8, 2019, pp 500-507

Objective:The present study was conducted with the objective of investigating the effectiveness of solution-focused group counseling (SFGC) on promoting the mental health of midwifery students.

Methods:The present study is an intervention-based study with a pretest, a post-test, and a control group. The statistical population included all of the midwifery students studying in the midwifery department of the Bam University of Medical Sciences, Kerman, Iran, who filled out the General Health Questionnaire (GHQ) in the screening phase. In the second phase, 40 individuals, having a low level of mental health based on the cutoff score of 23, were selected and randomly divided into 2 groups (intervention and control), each group with 20 participants. The intervention group participated in 5 sessions of 75 minutes for SFGC. Then, the post-test was held in both groups and the data analysis was conducted using the Mann-Whitney and the Kruskal-Wallis test with IBM SPSS Statistics for Windows, Version 21.0 (IBM Corp, Armonk, NY, USA). The significance level was considered as $p < 0.05$.

Results:The findings showed that the mean of the post-test mental health scores of the intervention group (14.5 ± 50.35) and of the control group (23.6 ± 35.83) showed a statistically significant difference ($p < 0.0001$). Moreover, the comparison between the mean scores of the mental health subscales (physical symptoms, stress, social performance, and depression) showed a statistically significant difference in these groups, and SFGC improved physical symptoms, stress, social performance, and depression in the members of the intervention group.

Conclusion:Solution-focused group counseling may improve all levels of mental health. This type of counseling is recommended to be used to solve the psychological problems and to improve the mental health of students, as well as of the staff of the health system. (63 references) (Author)

Full URL: <https://www.thieme-connect.de/products/ejournals/html/10.1055/s-0039-1693741>

20200110-8*

Nurturing autonomy in student midwives within a student led antenatal clinic. Hamilton V, Baird K, Fenwick J (2020), *Women and Birth: Journal of the Australian College of Midwives* vol 33, no 5, September 2020, pp 448-454

Background

A clinical environment that provides meaningful and productive learning experiences is essential for students of all health care professions. To support the learning needs of undergraduate midwifery students and facilitate the continuity of care experiences a student led clinic was established in one South East Queensland maternity unit.

Aim

This study explored the experiences and learning processes of previous and current midwifery students undertaking clinical practice within a student led clinic.

Method

Qualitative descriptive. Ten students that elected to work in the midwifery student led clinic were invited to participate in a one off digitally recorded face to face or telephone interview. Thematic analysis was used to analyse the data set. University ethical approval was granted (NRS/17/15/HREC).

Findings

Findings suggest the student led clinic positioned students in the 'driver's seat'. Overwhelmingly students described the clinic as providing them with an array of opportunities to 'lead' care rather than being forced to 'sit and watch'. Students believed the experience of working in the clinic increased their midwifery knowledge, skills, confidence, critical thinking, and the ability to advocate for and empower women.

Conclusion

High quality and supportive clinical teaching and learning experiences are vital for ensuring the student midwife develops into a competent practitioner who is fit for registration. The evidence from this small study highlights the benefits afforded to students of working in partnership not only with pregnant women but also with their university

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midwifery lecturer. The student's continuity of care learning experiences appeared to foster and cultivate their capability, identity, purpose, resourcefulness and connection; all the five senses of success. (21 references) (Author)

20191028-25

Hearing women's voices: a student midwife's reflection on calls to Ireland's Liveline programme and what we can learn. Brennan E (2019), *The Practising Midwife* vol 22, no 9, October 2019, pp 32-34

In the early part of April 2019, Liveline - an Irish national talk radio programme - received a call from the mother of a 13-week-old baby to express her disappointment at her recent treatment in the maternity services. What followed can only be described as the floodgates opening, as the women of Ireland raised their voices to echo this experience. Throughout the country and over the years, these women all felt the same: they had not been listened to; they had not been cared for; in some cases, they had been placed in outright danger. As a student midwife, this made for extremely frightening and uncomfortable listening. This piece, using Gibbs' (1988) model, is a reflection on my response to this event and my first day on placement, my fears about my own practice and my hopes for the future. (4 references) (Author)

20191028-12*

Midwifery Student Evaluation of Practice: The MidSTEP tool - Perceptions of clinical learning experiences. Griffiths M, Fenwick J, Gamble J, et al (2020), *Women and Birth: Journal of the Australian College of Midwives* vol 33, no 5, September 2020, pp 440-447

Background

Little emphasis has been given to the standardised measurement of midwifery students' perceptions of their clinical learning experiences.

Aim

To develop a tool that evaluates students' perceptions of their clinical learning experiences according to environment and impact of preceptors on professional development.

Methods

A cross-sectional design was used. Tool development had three phases: item generation; expert review to assess clarity, apparent internal consistency and content validity; and psychometric testing. All Bachelor of Midwifery students at one university in Australia were invited to complete the online survey. Psychometric testing included dimensionality, internal consistency and test-retest reliability.

Results

A 74% (n = 279) response rate was achieved. Factor analysis revealed the Clinical Learning Environment Scale and Impact of the Midwifery Preceptor Scale accounting for 53.6% and 71.5% of variance respectively. Both scales were reliable (Cronbach's alpha = .92 and .94) and valid. Overall, students positively rated the clinical learning environment and preceptors' abilities to foster their sense of identity as a midwife. Students were less satisfied with preceptors' understanding of the academic program.

Discussion

The new tool consists of two scales that reliably measure midwifery students' perceptions of how the clinical learning environment develops their skills and reflects a midwifery philosophy. Preceptors had a positive influence on students' skills and professional development.

Conclusions


The Midwifery Student Evaluation of Practice tool is the first valid and reliable measure of students' perceptions of their clinical learning experiences. Students' feedback provides valuable information to educators and preceptors on how best to optimise clinical learning. (51 references) (Author)

20191015-26*


Midwifery students' perspectives on how role models contribute to becoming a midwife: A qualitative study.

Nieuwenhuijze MJ, Thompson SM, Gudmundsdottir EY, et al (2020), *Women and Birth: Journal of the Australian College of Midwives* vol 33, no 5, September 2020, pp 433-439

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Background

The dynamics of maternal and newborn care challenge midwifery education programs to keep up-to-date. To prepare for their professional role in a changing world, role models are important agents for student learning.

Objective

To explore the ways in which Dutch and Icelandic midwifery students identify role models in contemporary midwifery education.

Methods

We conducted a descriptive, qualitative study between August 2017 and October 2018. In the Netherlands, 27 students participated in four focus groups and a further eight in individual interviews. In Iceland, five students participated in one focus group and a further four in individual interviews. All students had clinical experience in primary care and hospital. Data were analyzed using inductive content analysis.

Results

During their education, midwifery students identify people with attitudes and behaviors they appreciate. Students assimilate these attitudes and behaviors into a role model that represents their 'ideal midwife', who they can aspire to during their education. Positive role models portrayed woman-centered care, while students identified that negative role models displayed behaviors not fitting with good care. Students emphasized that they learnt not only by doing, they found storytelling and observing important aspects of role modelling. Students acknowledged the impact of positive midwifery role models on their trust in physiological childbirth and future style of practice.

Conclusion

Role models contribute to the development of students' skills, attitudes, behaviors, identity as midwife and trust in physiological childbirth. More explicit and critical attention to how and what students learn from role models can enrich the education program. (29 references) (Author)

20191001-14*

Acknowledging the primacy of continuity of care experiences in midwifery education. Gamble J, Sidebotham M, Gilkison A, et al (2020), Women and Birth: Journal of the Australian College of Midwives vol 33, no 2, March 2020, pp 111-118

Background

Continuity of midwifery care is the best maternity care model for women at any risk level, and there is a global imperative to improve access to midwifery-led care. However, diverse perspectives about how best to prepare graduates for working in midwifery continuity of care models persist. The continuity of care experience standard in Australia was anticipated to address this.

Aim

To challenge the dearth of published information about the structures and processes in midwifery education programs by identifying: the educational value and pedagogical intent of the continuity of care experience; issues with the implementation, completion and assessment of learning associated with continuity of care experience; and discuss curriculum models that facilitate optimal learning outcomes associated with this experience. We discuss the primacy of continuity of care experience in midwifery education programs in Australia.

Discussion

The inclusion of continuity of care experience in midwifery programs in Australia became mandatory in 2010 requiring 20, however this number was reduced to 10 in 2014. Research has shown the beneficial outcomes of continuity of care experience to both students and women. Continuity of care experience builds mutual support and nurturing between women and students, fosters clinical confidence, resilience, and influences career goals. We require curriculum coherence with both structural and conceptual elements focusing on continuity of care experience.

Implications and recommendations

Education standards that preference continuity of care experience as the optimal clinical education model with measurable learning outcomes, and alignment to a whole of program philosophy and program learning outcomes is required. (66 references) (Author)

Full URL: <https://doi.org/10.1016/j.wombi.2019.09.002>

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20190930-5

The best start for students?. Dewey R (2019), *Midwives* vol 22, September 2019, pp 45-47

Rachael Dewey, a second-year masters pre-registration student at Edinburgh Napier University, explores what Continuity of Carer means for Scottish midwives. (Author)

20190925-29

A midwife's advice for new students. Barker K (2019), *British Journal of Midwifery* vol 27, no 9, September 2019, p 543

The 'best of times, the worst of times'? Beginning your midwifery journey may be daunting, but it will also be incredibly rewarding. Karen Barker shares her words of wisdom for new starters. (Author)

20190923-8

Supporting student wellbeing. Carter L (2019), *Midwives* vol 22, September 2019, pp 26-27

RCM Student Midwives Forum member and third-year student midwife Lara Carter has some sage advice for taking care of your mental health. (Author)

20190923-10

A student midwife. McLellan M (2019), *Midwives* vol 22, September 2019, pp 32-33

Mhairi McLellan, third-year student midwife at Robert Gordon University, discusses the highs and lows of running a student midwifery society. (Author)

20190913-92*

Rural pipeline and willingness to work in rural areas: Mixed method study on students in midwifery and obstetric nursing in Mali. Sidibé CS, Touré O, Broerse JEW, et al (2019), *PLoS ONE* vol 14, no 9, 9 September 2019, e0222266

The availability and retention of healthcare professionals in rural areas and remote areas is a challenge to the health sector worldwide. Attracting people who are most likely to be interested in rural practice can be conducive to the sustainable availability of health services in rural areas where health facilities are typically understaffed and existing professionals often underqualified. This article aims to contribute to the rural pipeline evidence, and reports on the findings of a study that investigated the career choices of midwifery and obstetric nurse students in Mali. The article enquires into the relationship between their intention to practice in rural areas and the different components of the rural pipeline. A mixed method study using a survey, semi-structured interviews, and document analysis was conducted from October to December 2017 on third-year midwifery and obstetric nurse students and school-managers. Descriptive statistics and bivariate analysis were performed for quantitative data, and content analysis was carried out for the qualitative data. Key findings suggest that students prefer urban locations for living and for work. The intention to work in rural areas seems to be influenced by the current living situation (currently living in a rural area) or having attended secondary school or professional training in rural areas. (32 references)
(Author)

Full URL: <https://doi.org/10.1371/journal.pone.0222266>

20190813-27

Six months qualified. Axcell C (2019), *British Journal of Midwifery* vol 27, no 8, August 2019, p 534

Student midwives need not fear life as a qualified midwife. Claire Axcell talks about becoming more independent, building your confidence, and finding your 'midwifery crush'. (Author)

20190813-25

Never be afraid to question practice: the professional dilemma of a student midwife. Dunn C (2019), *British Journal of Midwifery* vol 27, no 8, August 2019, pp 525-530

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As a third-year caseloading student midwife, I experienced a professional dilemma during an intrapartum placement while working on a busy obstetric unit: to use vaginal examination to confirm full dilatation (a medical approach) or advocate normality and a woman-centred approach. This article explores the three influential forces that contributed to the dilemma: the culture of obstetric units, the midwife-woman relationship, and the importance of assertive behaviours to achieve autonomy. Through reflection and use of Gibbs' (1988) reflective cycle, I highlighted the need to develop my assertive skills, which also led me to make amendments to my own practice; this helped me transition from student to a newly qualified midwife. (Author)

20190806-52

Life of a new midwife: the heart of healing. Martin NE (2019), Midwifery Today no 130, Summer 2019, pp 44-45

A new midwife of color tells about some challenges she faced in her journal through midwifery school and how her first year as a midwife is now bearing fruit. (Author)

20190725-48

The implementation of a feedback tool for mothers that have participated in the Continuity of Care journey with midwifery students at Central Queensland University. Capper T (2019), Australian Midwifery News vol 19, no 2, Winter 2019, p 26

Discusses an online feedback tool that was used to collect feedback from women who had experienced continuity of care from midwifery students at Central Queensland University. (MB)

20190725-44

To the current students out there, what you are doing matters!. Britton E (2019), Australian Midwifery News vol 19, no 2, Winter 2019, pp 20-21

The author explains how the presence of a student midwife during her third pregnancy and birth helped her to heal after her previous birth experiences. (MB)

20190725-42

Students' Rights on Clinical and Vocational Placements. The Danny King Legal Team (2019), Australian Midwifery News vol 19, no 2, Winter 2019, p 17

Placements are a fantastic opportunity for students to put their theory and skills into practice, all while getting a taste of the industry. Over 50,000 students studying health degrees graduate every year from higher education institutions such as university or TAFE. Many of these are nursing or midwifery students who have completed several vocational placements. With this number on the rise we think it's important that students understand their role, responsibilities and rights while on placement. (3 references) (Author)

20190725-40

Thank you midwifery students. Raines C (2019), Australian Midwifery News vol 19, no 2, Winter 2019, p 15

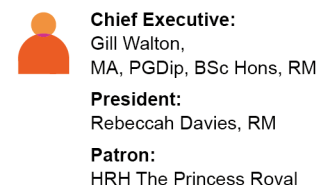
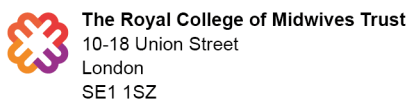
Midwifery has long been a part of the healthcare system, but until recently the benefits of having a midwife as the main maternity care provider has been less widely promoted. (2 references) (Author)

20190725-38

Sensitive issues of midwifery practice for first year students. Cummins A (2019), Australian Midwifery News vol 19, no 2, Winter 2019, pp 10-11

Provides an overview of a workshop designed to address attrition rates in Australian midwifery students. (8 references) (MB)

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20190710-37

Using elective placements effectively. Jacob D (2019), British Journal of Midwifery vol 27, no 7, July 2019, p 466

Elective placements, both in the UK and abroad, are a great opportunity for student midwives to experience care in other settings. Danielle Jacob shares what she learnt from her placements. (5 references) (Author)

20190710-18*

Midwifery students' experiences and expectations of using a model of holistic reflection. Bass J, Sidebotham M, Creedy D, et al (2020), Women and Birth: Journal of the Australian College of Midwives vol 33, no 4, July 2020, pp 383-392

Background

Reflective practice is a core professional competency and the hallmark of an autonomous, evidence-based midwife practitioner committed to lifelong learning. Despite this professional imperative little is currently known about how the development of reflective capacity is facilitated with midwifery students.

Aim

This study aimed to determine (1) the extent to which a holistic, structured model of reflection develops reflective capacity in midwifery students; and (2) their perceptions of learning and teaching strategies that build reflective capacity.

Design

A qualitative cross-sectional design involving focus groups and thematic analysis.

Participants

The Bass Model of Holistic Reflection was introduced to promote development of reflective capacity in midwifery students enrolled in entry to practice programs in two Australian universities. Students were provided with guidance on how to apply the model to their reflections. After using the model for at least one trimester twenty-seven (27) participants volunteered to participate in focus groups.

Findings

Four themes emerged 'safe space within a circle of trust', 'deep personal learning', 'consistency of application by skilled facilitators', and 'integration and connection'.

Key conclusions and implications for practice

Use of a holistic model combined with integrative and structured reflective activities supports the scaffolded and developmental nature of reflection. Alignment of the model with a woman centred midwifery philosophy generates midwifery knowledge and reflects student expectations of their role as aspiring midwives. Midwives' attitudes regarding reflection influences students' perceptions of value. Quality of feedback provided by educators affects levels of student motivation and engagement with reflection. (60 references) (Author)

20190703-48

A student midwife. Jenks R (2019), Midwives vol 22, May 2019, p 33

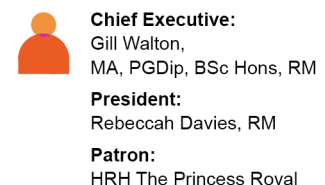
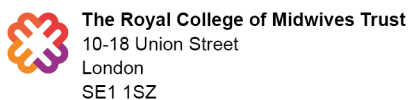
This third-year midwifery student at the University of West London hails the benefits of caseloading and Continuity of Carer. (Author)

20190624-84

Creating Guardians of Physiologic Birth: The Development of an Educational Initiative for Student Midwives in the Netherlands. Thompson SM, Nieuwenhuijze MJ, Kane Low L, et al (2019), Journal of Midwifery & Women's Health vol 64, no 5, September/October 2019, pp 641-648

Women want positive birth experiences with high quality maternity care that is neither too much, too soon, nor too little, too late. Research confirms the effectiveness of midwifery care, and the midwifery approach to birth as physiologic may counter the upward trend of the unnecessary medicalization of birth. The role of guardian of physiologic birth is seen as central to midwifery practice; however, medical hegemony has led to the subordination of midwives, which inhibits them in fulfilling the role as guardian of physiologic birth. Learning to become powerful advocates of physiologic birth creates midwives able to speak up for effective, evidence-based maternity care and

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challenge the unnecessary use of obstetric intervention. Midwifery education has a role to fulfil in molding midwives who are able to assume this role. This brief report describes the development of an educational prototype aimed at increasing student midwife agency as an advocate of physiologic birth. This was done using rapid prototyping (RP) methodology, in which important stakeholders gave input and feedback during the educational design and development process. Input from stakeholders led to the inclusion of persuasive communication strategies and discussion and debate as teaching methodologies in order to increase student midwife agency to argue for physiologic birth. Reflective evidence-based practice, using the Optimality Index-Netherlands, allowed students to reflect on their practice while providing a framework for discussion. Working with the RP methodology allowed for the development of a prototype that reflected the needs of midwifery stakeholders and was mindful of material and human resources. (41 references) (Author)

20190620-106*

Midwifery students' perception of their ability to provide culturally safe maternity care for Australian Aboriginal women. Kirkby L (2018), Australian Nursing and Midwifery Journal vol 26, no 4, October-December 2018, p 38

Registration to practise as a midwife is dependent on midwifery students meeting national competency standards.

This includes demonstrating cultural knowledge and understanding. (2 references) (Author)

Full URL: https://issuu.com/australiannursingfederation/docs/anmj_october_2018_issuu

20190613-5*

Resilience, stress and burnout in student midwives. Eaves JL, Payne N (2019), Nurse Education Today vol 79, August 2019, pp 188-193

Background:

There is a lack of research on resilience in midwifery, yet this may be a factor that can help prevent burnout and intention to leave the profession.

Objectives:

To explore the relationship between perceived stress, resilience and burnout and the intention to leave midwifery within Midwifery students.

Design:

A Quantitative study with a cross-sectional survey design.

Setting:

A London University in the UK.

Participants:

150 BSc student midwives, aged between 18 and 44, studying at University participated in this study. This included 72 students in year one, 26 in year two and 52 in year three.

Methods:

Participants completed the Perceived Stress Scale, the Oldenburg Burnout Inventory and the Resilience Scale-14 to examine their self-reported stress levels, burnout (emotional exhaustion and disengagement) and level of resilience. Intentions to quit the profession were also measured.

Results:

All variables were significantly correlated but in multiple regression analyses only stress predicted disengagement, and stress and year of study predicted emotional exhaustion. High stress and reduced resilience predicted intentions to quit midwifery. Resilience did not act as a moderator. Thus the findings suggest that resilience did not protect students from high levels of stress leading to burnout or wanting to quit, although resilience did help to reduce intentions to quit.

Conclusion:

Student stress levels are not moderated by resilience and resilience played no role in reducing burnout. However, resilience may help students to persevere in the profession rather than leaving their studies. In order to minimise burnout and stress we need to consider alternative ways of enhancing the current workforce to reduce the decline in midwives entering the profession. (Author)

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20190430-150*

Do midwifery International clinical placements influence students' practice and employment decisions?. Geraghty S, Davison C, DeLeo A, et al (2020), Women and Birth: Journal of the Australian College of Midwives vol 33, no 2, March 2020, pp 199-204

Aim

The aim of this study was to investigate whether an International two-week clinical maternity placement enhances, and is beneficial, to midwifery students' future practice and employment decisions during the final year of an undergraduate degree.

Background

International placements are common in undergraduate pre-registration nursing midwifery university curricula, with the emphasis on preparing students to work with diverse women in multicultural environments whilst incorporating cultural competence. However, little is known as to whether an International placement influences future graduate's work place choice.

Methods

Using a qualitative approach, focus groups were undertaken with 16 final year midwifery students from a University in Western Australia who had experienced a two-week International clinical midwifery placement in Tanzania (Africa) or Manilla (Philippines). Data was analysed using thematic analysis.

Findings

The results of the study revealed eight over-arching themes that revealed an increase in midwifery student's confidence; an awareness of the need to consolidate knowledge and skills, reinforcement of their own career aspirations, midwifery beliefs and trust in women and physiological birth.

Conclusion

This study confirms the benefits of overseas clinical placements, which provide opportunities beyond developing cultural sensitivity. Midwifery students are challenged to develop not only practical competence, but confidence to trust in themselves and the process of physiological birth. These experiences validate theoretical learning and provide opportunity to reflect on the possibilities of future employment and decision making as a midwife. (16 references) (Author)

20190430-133*

'A match made in midwifery': Women's perceptions of student midwife partnerships. Jefford E, Nolan SJ, Sansone H, et al (2020), Women and Birth: Journal of the Australian College of Midwives vol 33, no 2, March 2020, pp 193-198

Problem

Little is known regarding experiences of childbearing women participating in a Continuity of Care Experience.

Background

Continuity of Care immersion is considered a vital component of undergraduate education in Australia. A student midwife follows a woman's childbearing journey regardless of the woman's individual needs or chosen model of care.

Question

What do women value in their student-woman continuity experience, and does this vary with model of care provision?

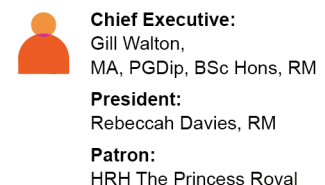
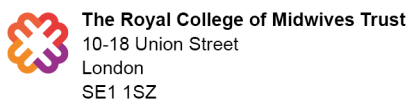
Methods

Qualitative analysis was conducted on open-text box responses from 946 mothers enrolled in one regional university Continuity of Care program between 2014-2018.

Findings

This qualitative descriptive study identified three overarching themes: 'Known student midwife'; 'Knowledge'; and, 'Professionalism'. The 'Known Student Midwife' was strongly associated with provision of support and advocacy for the woman and her partner/family. Women's responses were overwhelmingly positive, however, when some partnerships terminated, a negative impact was reported. Themes were often interlinked, suggesting when women valued one key attribute the others were somewhat related. Although rare, from some responses it was unclear if

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students had over-stepped professional boundaries, prompting the need for ongoing education.

Discussion

This study provides compelling evidence for the perceived value of the Continuity of Care Experience in Australian midwifery curricula, as well as possible areas of concern regarding the nature of professional behaviour.

Conclusions

Continuity of Care immersion plays a significant role in Australian midwifery education programs and is predominantly well received by childbearing women. Development of reflexive practice skills in undergraduate curricula may further enhance this experience for women. (33 references) (Author)

20190429-38*

'A powerful midwifery vision': Dutch student midwives' educational needs as advocates of physiological childbirth.

Thompson SM, Nieuwenhuijze MJ, Low LK, et al (2019), Women and Birth: Journal of the Australian College of Midwives 11 April 2019, online

Background

In order to internalize the midwifery philosophy of care and to learn how to advocate for physiological childbirth, student midwives in the Netherlands need learning experiences that expose them to physiological childbirth practices. Increased hospital births, wide variation in non-urgent referrals and escalating interventions impact on learning opportunities for physiological childbirth.

Midwifery educators need to find ways to support student agency in becoming advocates of physiological childbirth.

Objective

To gather students' opinions of what they need to become advocates of physiological childbirth.

Methods

Focus groups with student midwives (n = 37), examining attitudes regarding what educational programs must do to support physiological childbirth advocacy.

Results

Students reported feelings of personal power when the midwifery philosophy of care is internalized and expressed in practice. Students also identified dilemmas associated with supporting woman-centered care and promoting physiological childbirth. Perceived hierarchy in clinical settings causes difficulties, leading students to practice in accordance with the norms of midwife preceptors. Students are supported in the internalization and realization of the midwifery philosophy of care, including physiological childbirth, if they are exposed to positive examples of care in practice and have opportunities to discuss and reflect on these in the classroom.

Key conclusion

Midwifery education should focus on strategies that include navigating dilemmas in practice and helping students to express the midwifery philosophy of care in communication with other professionals and with women. Preceptors need to be supported in allowing student midwives opportunities to realize the midwifery philosophy of care, also when this differs from preceptor practice.

(40 references) (Author)

[Please note: this article is a digital version which may undergo minor changes in the future]

20190417-41

Students from the Daluzoasis Midwifery School in Spain explore their beliefs about birth. Brooks V (2019), Midwifery Matters vol 160, Spring 2019, pp 20-23

The students reflect on subjects such as rediscovering birth and rewriting the International Confederation of Midwives' International Code of Ethics for Midwives. (MB)

20190417-22*

Midwifery student's perceptions of caring for substance-using pregnant women. Doleman G, Geraghty S, DeLeo A (2019), Nurse Education Today vol 76, May 2019, pp 26-30

Aim

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To identify undergraduate and postgraduate student midwives' attitudes towards women using licit and illicit substances during pregnancy.

Background

Literature shows that globally, substance misuse during pregnancy is growing rapidly. Women who use substances during their pregnancy have specific healthcare needs and require midwives to demonstrate positive attitudes to improve appointment compliance and treatment completion.

Methods

A cross-sectional quantitative survey design was used. A total of 42 surveys were retained for full data analysis.

Findings

Of the 42 participants, 22 were undergraduate midwifery students and 20 were postgraduate midwifery students. The results revealed that both undergraduate and postgraduate students had positive attitudes towards women who used substances during pregnancy. Specifically, postgraduate students, with 1-2 years' experience looking after pregnant women, had the most positive attitudes towards substance use in pregnancy.

Conclusion

This study revealed that undergraduate and postgraduate midwifery students have positive attitudes towards women who misuse illicit and licit substances, which is important for providing quality care upon qualification as a registered midwife. It is essential that midwifery students, who will go on to qualify as registered midwives, are non-judgmental and positive to ensure adequate antenatal care and regular antenatal attendance so maternal and fetal wellbeing can be better managed. (Author)

20190402-16*

Has anyone seen the student? Creating a welcoming practice environment for students. Tremayne P, Hunt L (2008), British Journal of Nursing vol 28, no 6, 2019

A person's introduction to a new environment, whether they are a patient or a student, is critical. Although patients have the 'Hello my name is ...' campaign to make them less anxious when entering a clinical setting, there is no equivalent for students. Making both patients and students welcome is essential to establishing a rapport and a sense of belonging at a time when each can feel at their most vulnerable. This can influence their journey into something that is positive or negative. This article explores some practical measures that can be adopted to create a welcoming practice environment for students. (Author)

20190320-21

Midwifery students' experiences of working within a midwifery caseload model. Sidebotham M, Fenwick J (2019), Midwifery vol 74, July 2019, pp 21-28

Highlights:

- A caseload placement was a quality capstone experience for the midwifery student
- The midwife-woman-student relationship resulted in holistic learning and improved confidence
- Students valued being able to apply a woman centred social model of care
- Whilst challenging, students gained an understanding of sustainable caseload practice
- The study reinforced the value of the caseload model for women, midwives and students

Background:

Work integrated learning opportunities account for approximately half of the Bachelor of Midwifery program with the goal being to ensure that on graduation students are skilled to provide woman centred evidenced based midwifery care within any environment. There is increasing concern, however, over the quality of clinical experiences students are afforded.

Objective:

This study explored the experiences of third year Bachelor of Midwifery students in South East Queensland undertaking a clinical placement within a midwifery caseload model.

Design:

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A qualitative descriptive approach was adopted. Data were collected using semi-structured, digitally recorded telephone interviews. Thematic analysis was used to analyse the data set.

Setting:

Midwifery student clinical placement in caseload practice

Participants:

Twelve third year Bachelor of Midwifery students from one university who had experienced a clinical placement in a caseload midwifery model of between 4 and 8 weeks.

Findings:

Five themes emerged. These were labelled 'stepping in her shoes', 'bringing it all together', 'my own captive educator', 'knowing the woman', and 'it was hard - but it was worth it'. The three-way relationship between midwife, woman and student facilitated deep and active learning leading to a growth in confidence and readiness for practice. Students were afforded the opportunity to constantly integrate theory into practice within a woman centred social model of care where they also grew to understand how midwives operationalise caseload practice in a sustainable way. Students acknowledged the challenges they faced undertaking the placement, but all confirmed the value it had afforded them.

Key conclusions and Implications for practice:

This study has provided evidence that situating midwifery students within a continuity of care model facilitated a rich holistic learning experience for students. Not only did the placement enhance student's confidence and competence it also provided a real-world view of what working in that a caseload model could be like on graduation. This is vital if the profession is to support system level change ensuring all women have access to evidence informed maternity care. (42 references) (Author)

20190319-46*

Analysis of self-evaluated ethical competence of midwifery students at a selected nursing college in the Free State.

Mpeli MR (2018), Curationis vol 41, no 1, 29 August 2018, a1925

Background: It is imperative to know whether the students who have undergone a specific training perceive themselves as confident and competent in handling ethical dilemmas, in the face of contemporary ethical challenges. Such evaluation is significant especially for nursing and midwifery students who have undergone training that stipulates adherence to a code of ethics and professional norms. At present, such knowledge is limited, and this has an impact for ethics education.

Objectives: The article aims to describe the self-evaluated ethical competence of midwifery students and to contrast the findings to the content of the ethics instruction received. Based on outcomes, the article aims to convey the claim to nursing institutions that current strategies that rely on teaching nursing ethics without appraising the context of a situation are ineffective in fostering ethical competence amongst students.

Method: This study made use of a set of self-reflection reports in which the midwifery nursing students narrated their experiences in handling ethical issues.

Results: Analysis of the self-reflective reports revealed that one of the three dimensions of ethical competence was limited. There was evidence of moral perception, moral action and substandard moral reasoning. The principles that were mostly referred to within the narratives were autonomy and beneficence.

Conclusion: The findings support the argument that teaching principlism and enforcing a code of ethics without contextualising it coerces the student to conform without questioning their beliefs. Thus, ethical competence amongst the midwifery students may be described in terms of compliance to principles with limited reflection on the situation as a whole. (38 references) (Author)

Full URL: <https://doi.org/10.4102/curationis.v41i1.1925>


20190220-5

The mental health and wellbeing of midwifery students: An integrative review. Oates J, Topping A, Arias T, et al (2019),


Midwifery vol 72, May 2019, pp 80-89

Hlghlights:

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- There is growing concern about the mental wellbeing of both midwives and university students.
 - This integrative review presents a summary of the evidence on the state of midwifery students' mental health and wellbeing.
 - There is insufficient evidence to define the 'state of' midwifery student mental health, when compared to other students or healthcare professionals.
 - Qualitative studies on the midwifery student experience report that experiences in both the academic and clinical setting impinge on student wellbeing, including lack of support from mentors and bullying by qualified staff.
 - Future research should focus on interventions, longitudinal and cross-site comparisons. (65 references) (Author)
-

20190130-9

From clearing to midwife. Conway J (2019), MIDIRS Midwifery Digest vol 29, no 1, March 2019, pp 31-34

This reflective article describes the emotional journey I embarked upon whilst training as a student midwife. I will consider both the positive and negative experiences I encountered throughout my training and discuss the evidence regarding relationships between student midwives and their mentors. (14 references) (Author)

20190130-29

Implementing the UNICEF UK Baby Friendly Initiative university standards. Simpson H (2019), MIDIRS Midwifery Digest vol 29, no 1, March 2019, pp 101-104

Accreditation: The University of West London (UWL) became the first university to be reaccredited with the new UNICEF UK Baby Friendly Initiative standards in January 2017. This prestigious award within the midwifery courses not only benefits the university, but ultimately enables students to provide confident, evidenced-based care to mothers and babies in practice. This is of great importance, as demonstrated in the Scottish government maternal and infant nutrition survey 2017 which identified that 75% of mothers stopped breastfeeding before they intended to. (7 references) (Author)

20190130-11

Descriptive study describing student midwives' observations on obesity management in the antenatal phase of care.

Lynch C, Valimohamed Z (2019), MIDIRS Midwifery Digest vol 29, no 1, March 2019, pp 47-50

Objective: To explore student midwives' experiences of obesity advice being given to pregnant women by their mentors in the antenatal period.

Design: The study was conducted using a qualitative description (QD) design and collected data from a convenience sample using semi-structured interviews. Data were analysed thematically.

Participants: A sample of six student midwives was recruited from the University of West London (UWL). All the students were either on an 18-month or three-year midwifery degree programme and in their final year of study.

Findings: Women have very clear expectations of their midwife to provide lifestyle advice around obesity which is not currently being met. The reasons for this appear to be partly due to lack of training and partly due to lack of professional guidelines and advice.

Key conclusions: The data provided an insight into women's needs in terms of obesity advice and highlighted the need for progress to be made in creating services for obese women, with an urgent need to create multidisciplinary training for midwives and doctors. Developing specialist roles and providing specialist services could contribute extensively in improving maternity care services for obese pregnant women. (14 references) (Author)

20190117-53

Transitioning from Student to Midwife Information for students on the AHPRA registration process. King R (2018), Australian Midwifery News vol 18, no 4, Summer 2018, pp 49-51

The Australian College of Midwives has recently been looking at the terms we have applied to being a Graduate Member. As we thought about graduates and what this means we began to realise that we were not totally across the transition process of students becoming midwives. We also identified that the term 'graduation' might mean different

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things to different people for example it might be when you have completed your studies, or when you get your final results, when you register with AHPRA or when you attend your graduation ceremony. So this article will look at the initial registration process for students transitioning to midwife. (Author)

20190117-39

Reflection on how not to be a preceptor. Kellahan A (2018), Australian Midwifery News vol 18, no 4, Summer 2018, pp 21-22

A student midwife writes about her experiences working with a woman during induction of labour where she felt unacknowledged by the midwife in charge and was unable to support the birth as both she and the mother wanted. (CAP)

20190117-149*

Midwives: Training [written answer]. House of Commons (2019), Hansard Written question 206220, 16 January 2019

Stephen Hammond responds to a written question asked by Dr David Drew to the Secretary for Health and Social Care, with reference to how many student midwives began their training in each of the last five years. (CAP)

Full URL: <https://www.parliament.uk/business/publications/written-questions-answers-statements/written-question/Commons/2019-01-08/206220/>

20190117-148*

Midwives: Training [written answer]. House of Commons (2019), Hansard Written question 206221, 16 January 2019

Stephen Hammond responds to a written question asked by Dr David Drew to the Secretary for Health and Social Care, with reference to how many midwives there were in training in each of the last five years. (CAP)

Full URL: <https://www.parliament.uk/business/publications/written-questions-answers-statements/written-question/Commons/2019-01-08/206221/>

20190117-138*

Midwives: Training [written answer]. House of Commons (2019), Hansard Written question 206222, 16 January 2019

Stephen Hammond responds to a written question asked by Dr David Drew to the Secretary for Health and Social Care, with reference to how many clinical placements for midwifery students were there in each of the last five years; and how much financial support was provided for these placements by his Department. (CAP)

Full URL: <https://www.parliament.uk/business/publications/written-questions-answers-statements/written-question/Commons/2019-01-08/206222/>

20190117-136*

Midwives: Training [written answer]. House of Commons (2019), Hansard Written question 206223, 16 January 2019

Stephen Hammond responds to a written question asked by Dr David Drew to the Secretary for Health and Social Care, with reference to what proportion of student midwives who began training did not go on to graduate in each of the last five years for which figures are available. (CAP)

20190117-133*

Midwives: Training [written answer]. House of Commons (2019), Hansard Written question 206224, 16 January 2019

Stephen Hammond responds to a written question asked by Dr David Drew to the Secretary for Health and Social Care, with reference to how many people graduated in midwifery in each of the last five years. (CAP)

Full URL: <https://www.parliament.uk/business/publications/written-questions-answers-statements/written-question/Commons/2019-01-08/206224/>

20190117-131*

Midwives: Employment [written answer]. House of Commons (2019), Hansard Written question 206225, 16 January 2019

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Stephen Hammond responds to a written question asked by Dr David Drew to the Secretary for Health and Social Care, regarding what proportion of people graduating in midwifery went on to secure employment as midwives in the last five years for which figures are available. (CAP)

Full URL: <https://www.parliament.uk/business/publications/written-questions-answers-statements/written-question/Commons/2019-01-08/206225/>

20190117-126*

Midwives: Training [written answer]. House of Commons (2019), Hansard Written question 206226, 16 January 2019

Stephen Hammond responds to a written question asked by Dr David Drew to the Secretary for Health and Social Care, with reference to what assessment he has made of the capacity of (a) universities to train and (b) the NHS to provide clinical placements for the planned 3,000 additional student midwives who will begin their training over the next four years; and what steps his Department is taking to increase that capacity. (CAP)

Full URL: <https://www.parliament.uk/business/publications/written-questions-answers-statements/written-question/Commons/2019-01-08/206226/>

20190108-73*

Pasifika student experience in a Bachelor of Midwifery programme. Beatson D, Seiuli A, Patterson J, et al (2018), New Zealand College of Midwives Journal vol 54, December 2018, pp 44-50

Background: In New Zealand the Pasifika population comprises 6.9%. Rapid growth in the Pasifika population is anticipated and, with only 2.2% of registered midwives identifying as Pasifika, most Pasifika women are currently, and could increasingly be, unable to access a midwife from their culture. To help address this need Otago Polytechnic has identified Pasifika midwifery student success as a priority area. Aim: The objective of the research was to hear how Pasifika students experience studying midwifery, and to seek their contribution to the ongoing development of the learning environment and School processes, with the aim of increasing their enjoyment, success and retention rate in the programme. Method: Possible methodologies were considered, with the aim of developing a culturally appropriate relationship between the researcher and the participant. The Talanoa and the Kakala research approaches informed how the students were approached and the interviews conducted. To help frame the research, a flexible participatory model, 'Spacifichology', was chosen which recognises four categories of Pasifika learners. Following ethical approval, individual interviews were undertaken by the Pasifika researcher with the participants. The recordings were transcribed and analysed for themes. Findings: Two broad areas were uncovered. Firstly, 'the experience of being Pasifika' with subthemes: trying to fit in; it's not easy to ask for help; determination to succeed; and the desire to work with Pasifika women. And, secondly, 'the student experience in the programme' with subthemes: the value of ākonga (local tutorial groups); the costs of the programme; assignment writing; preferring face-to-face; making connections: a place to belong; and collectivism (it is about us). Conclusion: Pasifika students are challenged by competing demands from family, social responsibilities, financial issues and unfamiliarity in the tertiary education environment. Fostering a 'learning village' will help students to feel like they fit in. As educators, it is crucial for us to understand that it is always about 'us' for Pasifika students; not about them as individuals. Finally, these Pasifika students are determined to succeed. (19 references) (Author)

Full URL: <https://doi.org/10.12784/nzcominl54.2018.6.44-50>


20181210-10*

Support for Nursing and Midwifery Students in Scotland 2018-19. Scottish Government (2018), Scottish Government 5 December 2018


This booklet provides information for students on pre-registration Nursing and Midwifery courses in Scotland. It describes the Nursing and Midwifery Student Bursary (NMSB) Scheme in Scotland, who is eligible for it, what it is (including current rates) and how you can apply for it. This booklet is for guidance only. It cannot cover all individual circumstances. The scheme is administered by the Student Awards Agency Scotland (SAAS). (Author)

Full URL: <https://www2.gov.scot/Publications/2018/12/7316>

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20181205-47

Blown off course. Astrup J (2018), *Midwives* vol 21, Winter 2018, pp 36-40

Midwifery student drop-out rates can be high, but why do some students fall away? And what interventions could make a difference? The RePAIR report is providing some answers, writes Juliette Astrup. (Author)

20181205-46

Own, learn and laugh. Clifton K (2018), *Midwives* vol 21, Winter 2018, p 27

Kirsty Clifton admits to a mistake she made and reveals how she has learnt to let go of worrying about it. (Author)

20181204-50

Midwifery students' experiences in a health visiting placement: An interview study. Brook J, Rayment J, Bryar RM, et al (2018), *Journal of Health Visiting* vol 6, no 11, November 2018, pp 552-559

In the UK, there is a clear remit for midwives and health visitors to work collaboratively to care for pregnant women and new mothers. This study evaluated a clinical placement for midwifery students with health visitor mentors. The evaluation explored the experience of mentors and students during the placement, the effect on their understanding of the different roles and the potential effect on collaborative working in the future. Results indicated that students developed their knowledge of the health visitor role and learned transferable skills to take back to midwifery. They saw little collaborative practice, but identified ways to incorporate inter-professional working into their practice once qualified. Mentors were positive about sharing health visiting practice and the potential impact on relationships in the future. (Author)

20181109-18

The F word: Midwifery students' understanding of feminism. Davison C, Geraghty S, Dobbs K (2018), *British Journal of Midwifery* vol 26, no 11, November 2018, pp 731-737

Background:

Not all midwives embrace the word feminism however, it could be argued that providing midwifery care is an expression of feminism's core values.

Aims:

To describe and explain the views and knowledge of midwifery students on feminism and midwifery.

Methods:

A qualitative descriptive approach, employing an anonymous online questionnaire was implemented and analysed using thematic and content analysis.

Findings:

Eight themes were identified in this study that revealed midwifery student's views and knowledge on feminism and the impact it may have on midwifery clinical practice.

Conclusions:

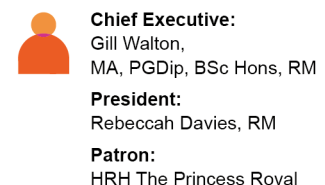
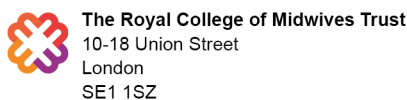
This study suggests midwifery students should receive adequate education regarding feminism. The advantages of midwifery students understanding feminism within the midwifery professional are undeniable and it is important that feminism is integrated into midwifery programmes. (28 references) (Author)

20181106-20

Maximising the health and wellbeing of the midwifery workforce with wellness recovery action planning. Nolan A, Hamilton S, Crockett M (2018), *The Practising Midwife* vol 21, no 10, November 2018, pp 32-34

In this piece, the authors describe and discuss the impact of a practice development initiative with a cohort of midwives working in two of five health and social care trusts in Northern Ireland. This initiative involved the rolling out of 'Wellness recovery action planning' (or WRAP) awareness workshops. Six separate sessions were delivered to 100 midwives working within the Western and Belfast Health and Social Care Trusts. Feedback from participants revealed some intriguing insights but, in particular, that caring for others in the context of health and social care starts

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with effective care of the self. The authors conclude that with the apparent success of this initiative, similar WRAP awareness sessions and perhaps even more formalised WRAP groups could be offered to other staff groups, including midwifery support workers and beyond. (2 references) (Author)

20181023-5*

Cultural empathy in midwifery students: assessment of an education program. Hogan R, Rossiter C, Catling C (2018), Nurse Education Today vol 70, November 2018, pp 103-108

Background

The ability of midwives to provide empathic care that is culturally appropriate is critical for women to feel accepted by the midwives who support them. Australia is a culturally diverse society, yet there is evidence of poorer maternity outcomes for some women and infants, related to their cultural background.

Objectives

This study's objective was to evaluate the effectiveness of an education program for student midwives. The program was intended to increase the cultural empathy of future midwives, to help ensure greater cultural safety and optimal maternity outcomes across all sections of Australian society.

Design

This quantitative study compared pre- and post-intervention measures of students' empathy.

Setting

The health faculty of a large urban university in Australia.

Participants

Fifty-five students from all three years of an undergraduate midwifery program participated.

Methods

The study examined students' scores on the Jefferson Scale of Empathy for health profession students, measured before and immediately after the education program, and again after four weeks.

Results

The midwifery students had a high mean baseline score on the empathy scale. Scores increased significantly after the education program. Students with lower pre-test scores recorded significantly greater increases in their empathy levels than those who were more empathic initially. Empathy scores declined one month after the program, but remained higher than baseline levels.

Conclusions

Several studies have explored empathy levels amongst current and future health professionals. However, few studies of health professional students have evaluated the impact of specific education interventions addressing cultural empathy. This study found that midwifery students tended to have higher empathy scores than students in other health disciplines. The education workshop further increased participants' scores. (Author)

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20181016-14*

The price of journeying towards the prize-Commencing nursing students' experiences of working and studying: A qualitative study. Salamonsen Y, Priddis H, Woodmass JM, et al (2018), Journal of Clinical Nursing vol 27, no 21-22, November 2018, pp 4141-4149

Aims and objectives


To explore the experiences of commencing first-year undergraduate nursing students who were studying full time while engaging in 20 or more hours of paid work each week.

Method


Using a qualitative exploratory design, commencing full-time nursing students who were employed in paid work for at least 20 hr per week were interviewed between May-June 2016. Data were thematically analysed using the following approach: data familiarisation, generating initial codes independently, searching and reviewing themes and subthemes, and defining and naming these themes and subthemes.

Results

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Four main themes were identified which illustrated students' experiences of working and studying: (a) 'Work is a necessity...not a choice' identified how students relied heavily on the financial income from paid work to support themselves and others during their studies, (b) 'Something's got to give' highlighted the sacrifices that needed to be made to avoid negative effects on their studies, (c) 'It's a balancing act!' demonstrated how students studied strategically and balanced their workload despite challenges, and lastly (d) 'Being supported to work and study' described the overwhelming support from others for students to succeed academically.

Conclusions

Despite support, working 20 hr or more per week while studying full time often overwhelmed students' personal resources and negatively impacted on course grades. Inflexible University timetables compounded the challenges experienced by students who struggled to balance work and study commitments.

Relevance to clinical practice

Nursing employers play a pivotal role in enabling students to juggle effectively their work-study commitments, through providing work flexibility. Students may also benefit if the nursing workforce advocates that they be awarded exclusion from selected clinical placement requirements, particularly if the clinical placement focus is closely related to their current nursing employment. (Author)

20181011-30

New academic year, new challenges: Tips for student midwives to maintain momentum and motivation. Power A, Coiffait S (2018), British Journal of Midwifery vol 26, no 10, October 2018, pp 683-685

At the start of the academic year, the physical signs of progression from one year to the next for student midwives include an additional stripe on an epaulette, a different coloured badge or perhaps a change of uniform. But what about emotional progression? If we think of learning as a continuum, a lifelong process of developing skills and knowledge, then the transition from one year to the next should be seamless. However, in the context of the pre-registration midwifery programme, each academic year places more complex demands on students in both theory and practice as they progress from concentrating on normality in year one, to altered health in year two, to leadership, consolidation of practice and preparation for qualification in year three.

The Nursing and Midwifery Council (NMC) Code requires midwives to be 'lifelong learners', basing their practice on the best available evidence-an ethos that should be embedded from day one of midwifery training. After a summer break, returning to studies and the physical and emotional demands of the pre-registration midwifery programme can be daunting; this article will provide tips for students to maintain momentum and motivation as they progress to the next year of their studies. (Author)

20181002-56

A student midwife's perspective from the UK. Lovell A (2018), Midwifery vol 65, October 2018, p 93

As I come to the end of my training as a student midwife I am filled with both excitement and apprehension for my forthcoming plunge into life as an autonomous registered midwife. Over the last three years I have had many polarising experiences, in university and on clinical placement, which have developed me personally and prepared me as a future midwife. (Author)

20181002-55

A student midwife's perspective from Australia. Hillier S (2018), Midwifery vol 65, October 2018, p 92

I am a third year student based in Sydney's western suburbs and currently completing the Bachelor of Midwifery degree at Western Sydney University. This is a three year degree programme that on reflection is not for the faint hearted! The degree is completed full-time with a minimum of 40 h per week of course work, clinical placement blocks and a requirement to follow 10 women across the perinatal period through a Continuity of Care programme, which is probably not dissimilar to other midwifery degrees internationally. (Author)

20181002-54

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A student midwife's perspective from South Africa. Steyn A (2018), Midwifery vol 65, October 2018, p 91

If someone had asked me what I was most afraid of when starting the final year of my studies in BSocSc. Nursing, a comprehensive course in nursing and midwifery, my answer was straight - midwifery. I was so worried when I thought of having to support a woman to birth her baby; would I ever have enough knowledge to feel competent and confident in my skills or what if I had two lives in my hands but my action resulted in a death? (Author)

20180925-82

Supporting failing students: How collaboration is key. Power A, Albaradura O (2018), British Journal of Midwifery vol 26, no 9, September 2018, pp 615-617

Nursing and Midwifery Council (NMC) standards state that the balance between clinical practice and theory in pre-registration midwifery programmes must be no less than 50% practice and no less than 40% theory, with students being supported by 'midwife teachers' and 'midwife mentors' (NMC, 2009:18). Midwife teachers are expected to be involved in learning and assessment in both academic and practice learning environments by engaging in activities such as link tutoring; facilitating mentor development and updates; having a part-time clinical role or being involved with practice development, midwives' continuing professional development (CPD) or practice-based research activities.

Clinical practice is supervised and graded by sign-off mentors, 'gatekeepers to the profession' who confirm that students are clinically competent, commensurate with their level of training, and are fit for entry to the midwives' part of the register at the end of their 3-year programme of study.

This article will consider the importance of a collaborative approach between universities and clinical placement providers, particularly in relation to supporting failing students as, while 'there has to be the recognition that some students need to fail', sometimes students just require more focused support and planning to achieve the required skills, competencies and confidence in practice. (8 references) (Author)

20180918-40

Student voice: believe in yourself. Webster L (2018), Midwives vol 21, Autumn 2018, p 26

Louise Webster thought she'd fallen at the last hurdle in becoming a midwife, but with grit and determination she reached her goal. (Author)

20180906-39

Mentorship: the struggling student midwife and the importance of continuity of mentor. Tant M (2018), The Practising Midwife vol 21, no 8, September 2018, pp 9-13

The concerns experienced by midwives supporting struggling student midwives are varied and can range from a lack of preparation for the mentorship role to a fear of having to fail a student. Furthermore student midwives can slip through the net and may even qualify without the necessary clinical or professional standards being met. This article explores how continuity, a central concept of midwifery care, is also the key to successful mentorship. (10 references) (Author)

20180828-1

Self-assessed confidence of students on selected midwifery skills: Comparing diploma and bachelors programmes in one province of India. Sharma B, Hildingsson I, Johansson E, et al (2018), Midwifery vol 67, December 2018, pp 12-17

Objective:

There are two integrated pre-service education programmes for nurses and midwives in India; a Diploma in General Nursing and Midwifery (GNM) and Bachelor's in nursing (BSc nursing). This study assessed and compared confidence of final-year students from these two programmes for selected midwifery skills from the list of midwifery competencies given by the International Confederation of Midwives (ICM).

Design:

A cross-sectional survey.

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Participants:

633 final-year students, from 25 educational institutions randomly selected, stratified by the type of programme (diploma/bachelor), and ownership (private/government) from the Gujarat province.

Data collection and analysis:

Students assessed their confidence on a 4-point scale, in four midwifery competency domains-antepartum, intrapartum, postpartum, and newborn care. Skill statements were reduced to subscales for each competency domain separately through Principle Component Analysis. Crude and adjusted odds ratios with 95% CI were calculated for students with high confidence (≥ 75 th percentile on each subscale) and not high (all others) between diploma and bachelor students.

Findings:

The diploma students were 2-4 times more likely to have high confidence on all subscales under antepartum, intrapartum, postpartum and newborn care compared to the bachelor students. Though both groups had less hands-on clinical practice during their education, more diploma students could fulfil the requirements of attending recommended number of births compared to the bachelor students.

Conclusion:

Overall the students of the general nursing and midwifery (GNM) programme have higher confidence in skills for antepartum, intrapartum, newborn and postpartum care. One important reason is more hands-on clinical practice for the diploma compared to the bachelor students. (44 references) (Author)

20180816-16*

What prevents midwifery quality care in Bangladesh? A focus group enquiry with midwifery students. Bogren M, Erlandsson K, Members of the Midwifery Faculty Master's degree holders in Sexual and Reproductive Health and Rights, et al (2018), BMC Health Services Research vol 18, no 639, 15 August 2018

Background

With professional midwives being introduced in Bangladesh in 2013, the aim of this study was to describe midwifery students perceptions on midwives' realities in Bangladesh, based on their own experiences.

Method

Data were collected through 14 focus group discussions that included a total of 67 third-year diploma midwifery students at public nursing institutes/colleges in different parts of Bangladesh. Data were analyzed deductively using an analytical framework identifying social, professional and economical barriers to the provision of quality care by midwifery personnel.

Results

The social barriers preventing midwifery quality care falls outside the parameters of Bangladeshi cultural norms that have been shaped by beliefs associated with religion, society, and gender norms. This puts midwives in a vulnerable position due to cultural prejudice. Professional barriers include heavy workloads with a shortage of staff who were not utilized to their full capacity within the health system. The reason for this was a lack of recognition in the medical hierarchy, leaving midwives with low levels of autonomy. Economical barriers were reflected by lack of supplies and hospital beds, midwives earning only low and/or irregular salaries, a lack of opportunities for recreation, and personal insecurity related to lack of housing and transportation.

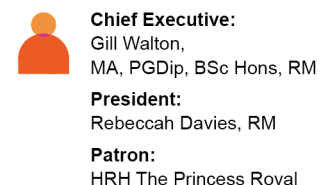
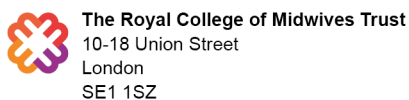
Conclusion

Without adequate support for midwives, to strengthen their self-confidence through education and through continuous professional and economic development, little can be achieved in terms of improving quality care of women during the period around early and late pregnancy including childbirth. The findings can be used for discussions aimed to mobilize a midwifery workforce across the continuum of care to deliver quality reproductive health care services. No matter how much adequate support is provided to midwives, to strengthen their self-confidence through education, continuous professional and economic development, addressing the social barriers is a prerequisite for provision of quality care.

(40 references) (Author) [Please note: this article is a digital version which may undergo minor changes in the future]

Full URL: <https://doi.org/10.1186/s12913-018-3447-5>

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20180801-58*

Midwifery students' experiences of their clinical internship: A qualitative descriptive study. Bradshaw C, Murphy Tighe S, Doody O (2018), Nurse Education Today vol 68, September 2018, pp 213-217

Background

Globally the safety of mothers and babies is fundamental in maternity care. Central to ensuring this safety is appropriate preparation of midwifery students' to ensure graduates are equipped to assume the responsibilities of delivering safe and effective maternity care. In preparation for autonomous practice Irish midwifery students' undertake a 36 week internship in the final year of the BSc Midwifery programme. Within this paid internship midwifery students' have the opportunity to develop professional behaviours, consolidate knowledge and learn necessary skills to fulfil the role of midwife under the supervision of registered midwives.

Objective

To explore midwifery students' experiences of the internship period.

Design and Method

A descriptive qualitative study using focus groups with ethical approval.

Setting and Participants

BSc Midwifery students' in the final year of their programme (n = 17) in an Irish University were invited to participate in a focus group interview midway through their internship. All participants (n = 13) had experience of working in two sites used for internship at the time of data collection.

Results

Key findings include the importance of the internship period in consolidating clinical skills and building confidence and competence for midwifery practice. Midwifery students' experience considerable stress during the internship period. Demands identified as stressors include providing care in increasingly complex clinical areas, meeting academic deadlines and maintaining a work life balance. Negative interpersonal experiences and dismissive attitudes to reflection on practice were barriers to learning. Midwifery students' articulated the importance of learning through doing, a supportive learning culture and philosophy in the unit, protected time for reflection and being included and valued as part of the midwifery team.

Conclusions

The benefits and challenges associated with internship in midwifery are apparent, particularly when students' are contending with two geographically distant sites. Support mechanisms and suggestions for improvements are considered. (56 references) (Author)

20180801-39

Reflections of a student midwife: the importance of discussing birth experiences. Greenwood H (2018), MIDIRS Midwifery Digest vol 28, no 3, September 2018, pp 352-356

In this article, a third-year student reflects on a postnatal encounter with a woman expressing dissatisfaction with her birth experience. The psychological implications of this are considered and how these ultimately influence her client's transition to motherhood. What happens when a woman's expectations are at odds with the reality of her birth experience? How does the bias of the midwife inform social definitions of 'good birth'? These questions are explored to develop new understandings of postnatal birth discussion, and action points to improve the experiences of new mothers. (20 references) (Author)

20180720-4

A student midwife's perspective from Sweden. Ringström MT (2018), Midwifery vol 65, October 2018, p 90

Uppsala University was founded in 1477 but it took 530 years before a midwifery program was established! However, the fact that the program started in 2007 meant that it incorporated relevant, up-to-date segments right from the start. (Author)

20180710-10

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Birth Where The Heart Is: Reflections on Broadening My Midwifery Learning in the Country I Call 'Home'. St Bernard Hitz, J (2018), Canadian Journal of Midwifery Research and Practice vol 17, no 1, Spring/Summer 2018, pp 34-40

A Canadian-born student midwife with Grenadian parents and ancestry comments on her personal identity and how this affected her on a clinical placement at a hospital in Grenada. She describes her experiences assisting women in labour, and how her knowledge of the local dialect and her identity as a child of Grenadian parents helped her. However, she also acknowledges her position as a Canadian visitor, a 'foreigner', particularly given the island's colonial history. (KRB)

20180622-13*

Transferable skills, case-loading midwifery and reflection: my journey as a student midwife. Lovell A (2018), Midwifery 20 June 2018. Article in press

As I come to the end of my training as a student midwife I am filled with both excitement and apprehension for my forthcoming plunge into life as an autonomous registered midwife. Over the last three years I have had many polarising experiences, in university and on clinical placement, which have developed me personally and prepared me as a future midwife. (Author)

20180530-33

Dream come true. Barilli E (2018), Midwives Summer 2018, p 27

A third-year student midwife reflects on her community placement in the Scottish Highlands. The midwives at her unit offered holistic, family-centred care to their own caseload of women and were able to conduct personalised antenatal appointments for all women in their homes. The author highlights the continuity of care she was able to provide as part of the team and the immense job satisfaction this gave her colleagues, and encourages student midwives to engage with caseload midwifery throughout their training. (KRB)

20180530-30

A student midwife's open letter. Anon (2018), Midwives Summer 2018, p 24

A first-year student midwife shares her opinion on studying for a midwifery degree in the UK and working for the NHS. She comments on short staffing in labour wards, lack of continuity in supervision, exploitation of students, and bending of the rules to have students' competencies signed off in order for them to progress through the course. (KRB)

20180509-4

Baby Friendly Initiative university education standards create positive changes in midwifery students' reported knowledge, three-year case study. McIntyre H, Fraser D (2018), MIDIRS Midwifery Digest vol 28, no 2, June 2018, pp 219-226

Objective: To identify the impact of incorporating the UNICEF UK Baby Friendly Initiative (BFI) (2002) education standards into a midwifery programme.

Design: A three-year longitudinal case study using qualitative and quantitative methods. Documentary evidence, questionnaires and interviews a year apart were collected.

Setting: Five NHS trusts in the Midlands, UK.

Participants: A cohort of three-year midwifery students and their mentors.

Interventions: Integration of the UNICEF UK BFI (2002) education standards.

Findings: Students enter midwifery with varied personal knowledge, skills and experiences of infant feeding.

Knowledge gained relates to anatomy of the breast, physiology of lactation and a limited number of the benefits of breastfeeding. The challenges of using formula are not broached and the constituents of breast and formula milk little used. Students at the point of qualification considered themselves competent in supporting 'normal' infant feeding situations; however, they would seek guidance for more complex scenarios.

Key conclusions: Outcomes were independent of trust BFI status although the more congruent the philosophy of care the easier it was for student learning. All students and mentors identified greater knowledge from early on in this

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programme. Communication skills develop from directive and generalised to discursive, facilitative and individualised by the third year.

Implications for practice: UNICEF UK BFI (2002) education standards have a positive impact on infant feeding knowledge and communication skills. (49 references) (Author)

20180509-2

Caring for families experiencing a stillbirth: a student midwife's reflection. Ibrahim M (2018), MIDIRS Midwifery Digest vol 28, no 2, June 2018, pp 187-190

A student midwife's reflection on her own feelings of unpreparedness when caring for a family experiencing a stillbirth and the effect this may have on the woman and her family. The author discusses improvements needed to bereavement services and for more appropriate training in universities to help professionals promote well-being and empowerment of bereaved families. (26 references) (ABS)

20180509-1

'Exactly the birth I want': a student midwife's reflection on a woman's wishes. McLoughry L (2018), MIDIRS Midwifery Digest vol 28, no 2, June 2018, pp 185-187

A student midwife reflects upon her experience of one woman's concerns during her pregnancy and birth and focuses on the ability to facilitate 'exactly the birth she wanted' through effective listening. (14 references) (ABS)

20180508-28

When all you want to do is run out of the room. Weston R (2018), The Practising Midwife vol 21, no 5, May 2018, pp 31-34

This is a reflective article I wrote shortly after I was involved in a traumatic, sudden and heart-breaking event in practice. I had just begun my second year of midwifery and was excited about working with a new mentor who I knew had a fantastic reputation both as a midwife and as a mentor. This was my first day as a second year working in the birthing unit and I was eager to see what the night shift would bring. Sadly, the night shift turned out so differently from what I had anticipated. I found writing about my feelings and emotions afterwards a therapeutic outlet. In his seminal writing on the reflective practitioner, this is what Shon (1995) refers to as 'Reflection on Action'.

This article focuses not on the clinical setting but instead on the feelings and emotions of a student, how you believe you should act in a situation and the support which we all need as we make our way through our training. (Author)

20180413-21*

Nursing and midwifery students' perception of learning enablers and gains in the first semester of their BSc programmes: a cross sectional study. Redmond C, Davies C, Halligan P, et al (2018), Nurse Education Today vol 65, June 2018, pp 242-249

Background

The student experience in the first year of university is fundamental to successful adaption to the higher education environment and shapes student engagement with their chosen degree. Students' feedback on this experience is essential when designing or reviewing curricula.

Objectives

The aim of this study was to explore students' perceptions of their learning gains to identify factors that support student learning and identify elements that need improvement if specific learning needs are to be met.

Design

A cross sectional descriptive study.

Setting

A large urban university in Ireland that provides undergraduate nursing and midwifery degree programmes.

Participants and Methods

The study was conducted using the Student Assessment of Learning Gains (SALG) questionnaire. This instrument consists of a series of closed questions which explore perceived student gains in skills, cognitions and attitudes. The

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questionnaire was adapted for a semester rather than a module evaluation. The tool also includes a series of open questions inviting students to comment in each section.

Results

Students (n = 206) positively evaluated teaching and learning approaches used. The greatest enablers of learning were clinical skills laboratory small group teaching and support followed by online learning materials and multiple choice formative assessment questions. They reported gains in knowledge, generic skills development and an increase in confidence and enthusiasm for their chosen career.

Conclusion

The feedback gained in this study provides valuable knowledge about the elements that support nursing and midwifery students learning and highlights areas that require attention. This is particularly useful for faculty who are involved in curriculum review and enhancement and in student engagement and retention. (Author)

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20180314-68

Student survival guide no 7 - medicine management. Anderson A, Thorpe H (2018), *The Practising Midwife* vol 21, no 3, March 2018, pp 14-18

In this article Alison Anderson and Holly Thorpe explore principles, guidelines and the safe administration of medicines, along with some useful tips for revision and student support resources.

Medicine management is an essential part of midwifery practice. The term medicine management incorporates professionalism, safe supply and administration of medicinal products and best practice to ensure women receive appropriate, personalised care. It is essential that students establish confidence and competence with the administration of medicines within their pre-registration training programme. The use of theory and clinical practice will be preparation for becoming a registered midwife. (26 references) (Author)

20180313-93

Fit for purpose. Pope J (2018), *Midwives Spring* 2018, p 27

A final-year student midwife describes how taking up running improved her mental health and fitness, helping her cope with the demands of her midwifery course, lose weight, and raise her fitness at the same time. The running gave her much more energy and made her feel happier, and she went on to join the gym and run the Wales marathon. From nearly dropping out of the course, she started becoming excited about midwifery again. (KRB)

20180313-87

Striking a chord. Scarlett S (2018), *Midwives Spring* 2018, p 26

A second-year midwife shares a poem she wrote, inspired by the story of a mother denied the act of holding her baby by a midwife after her emergency caesarean section. The author was driven to reflect on the kind of midwife she wants to be. (KRB)

20180222-133

Midwifery students' well-being among undergraduates in Slovenia: A pilot study. Mivšek P, Āimälä A-M, Boštjan Ž, et al (2018), *Midwifery* vol 1, June 2018, pp 63-65

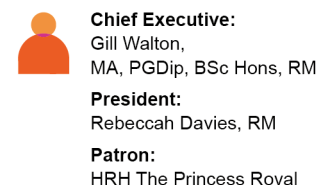
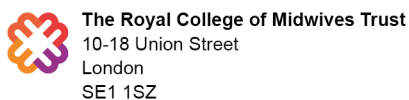
Objectives

Midwifery education is very demanding considering the professional competencies student midwives are required to develop. It can cause different levels of stress to students and affect their learning abilities. With the JDCS (Job Demands-Control-Social support) model adapted for educational purposes we aimed to estimate the midwifery students' coping abilities with study related stress.

Research design

A quantitative study was conducted using a questionnaire that evaluated perceived demand (9 items), perceived control (10 items), and perceived social support (10 items) with a 5-point Likert scale. 94 students were invited to

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participate in the study in autumn 2014. All necessary steps to address the ethical issues of the study were undertaken beforehand.

Findings

One quarter of Slovenian midwifery students perceived midwifery education as too demanding, while 31% of them thought it was low-strained. 41% answered that the study motivated them. 28% believed that they lacked the possibility to make their own decisions regarding the study.

Key conclusions

The findings indicate that the level of Slovenian midwifery students' well-being is generally high. Using the JDCS model in midwifery education, we could evaluate students' general coping abilities with study related stress. More studies should be performed to evaluate the research tool internationally. (18 references) (Author)

20180206-157

Are students 'empty vessels', or can previous experience enhance future practice?. Power A, Holland L (2018), British Journal of Midwifery vol 26, no 2, February 2018, pp 125-127

In the pedagogical model used in the education of children since the 19th century (Hill, 2015), the educationalist has control and decides the content and mode of delivery, with the students as 'empty vessels' or passive recipients of information. In contrast, adult learners are self-directing, having a repertoire of experience and are internally motivated to learn subject matter that can be applied immediately (Knowles, 1998). Each student's previous experience not only makes their learning individual, but also has the potential to enrich the learning experiences of their peers and positively impact on the quality of care received by women and their babies.

This article will consider the theory on how adults learn best, identifying the link between previous experience and the acquisition and application of new knowledge, and will go on to focus on the experiences of Laney Holland, a third-year student midwife, as an example of the potential for previous experiences to enhance midwives' future practice. (11 references) (Author)

20180201-106

Staying afloat and passionate: building a university society. Brindle A, Brice G (2018), The Practising Midwife vol 21, no 2, February 2018, pp 12-16

University life for any student can be pretty full-on with deadlines and studying, but the midwifery degree is notorious for being one of the toughest (as well as most rewarding), as the course must be completed while undertaking a full-time clinical placement. So what can midwifery students do to help keep the fires of passion burning for the duration of the course? With the added pressure of full time placements, it is easy for even the most dedicated and committed student to feel pressurised. This fast-paced journey can be even more demanding if you have other responsibilities, such as family responsibilities, such as family life or paid work. Staying afloat and keeping the passion are important, to survive the tough times while staying inspired and embracing further career development and learning. One way of doing this is by joining a student society. This article explores how Midwifery societies can help in staying afloat and passionate throughout the student midwife journey. (6 references) (Author)

20180131-35

An international perspective of a visit to Berlin. Raynor M, Cheadle P, Taylor H (2018), MIDIRS Midwifery Digest vol 28, no 1, March 2018, pp 122-123

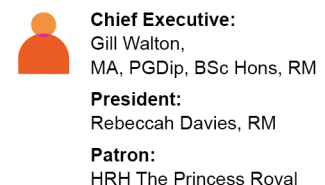
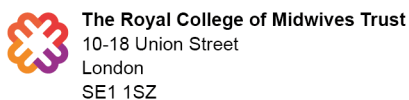
A short narrative reflecting on two student midwives and a senior lecturer in midwifery's experience of a study trip to Berlin. (ABS)

20180123-68*

Professional confidence among Swedish final year midwifery students - A cross-sectional study. Back L, Sharma B, Karlstrom A, et al (2017), Sexual & Reproductive Healthcare vol 14, December 2017, pp 69-78

Highlights

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- Swedish midwifery students need more training in obstetrical emergency situations. Simulations or more practice may increase confidence for students.
- Professional confidence is of importance for becoming a midwife. Confidence influences everyone and it has a sense of feeling safe incorporated.
- Swedish midwifery education needs to change to meet the expectations of midwifery students. It is time to extend the education so it offers the students a possibility to learn in a less stressful environment.
- Despite the need for training in obstetrical emergency situations, does the Swedish midwifery students need to relay on normality and 'women centered care' as underlying principle in the profession.

Objective

Previous international studies have shown that midwifery students do not feel confident in many areas where they are supposed to practice independently.

The knowledge about Swedish midwifery students' confidence is fairly under investigated. The purpose of the present study was to explore final years' midwifery students' professional confidence in basic midwifery skills according to ICM competencies and associated factors.

Methods

A cross-sectional survey where all midwifery programs in Sweden were invited to participate. Data was collected by a questionnaire that measured midwifery students self-reported assessment of confidence against four selected domains of ICM competencies; antenatal, intrapartum, postpartum and new-born care.

Result

The main findings of this study showed that Swedish midwifery students were confident in managing normal pregnancy, labour and birth. Midwifery students at a school with a medical faculty were more confident in handling obstetric emergency situations. Some background variables were also associated with confidence.

Conclusion

This study highlighted some midwifery skills that needs further training and reflection. More training and developing confidence in complicated and emergency situations are needed. There seem to be a need of midwifery education reforms if we believe that high levels of confidence at the time of graduation is equal to competent and skilled midwives in the future. (Author)

20180117-80

Working collaboratively on publications and conference presentations - valuing midwifery students' contribution to the future of midwifery. Firth A (2017), Australian Midwifery News vol 17, no 4, Summer 2017, p 29

Short article which recognises the benefit of collaborative working between qualified and student midwives.

Highlights the strengths in creating a partnership when writing for publication or conference presentations, with tips and ideas for how, what, when, where and why they may be beneficial. (3 references)

20180117-73

The Good, the Bad and the Ugly: midwifery students need to see it all. Doherty A (2017), Australian Midwifery News vol 17, no 4, Summer 2017, p 26

The 'good' aspects of midwifery are so blindingly obvious, so numerous, they are the major reason why many of us become midwives. The joy of birth, the creation of families, the smiles and tears of happiness, the sound of a newborn cry, there are so many 'good' aspects to midwifery that every day brings a new one. But midwifery students also need to see the 'bad' and the 'ugly' side of midwifery. (Author)

20180117-69

Supporting the med students: part of our midwifery duty. Leslous M (2017), Australian Midwifery News vol 17, no 4, Summer 2017, p 19

Brief personal account of a student midwife who experienced negative criticism from a surgeon while undergoing a minor surgical procedure herself. During her small surgical procedure, the surgeon shared his viewpoint that by

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20180105-9*

Exploring perinatal death with midwifery students' using a collaborative art project. Barry M, Quinn C, Bradshaw C, et al (2017), Nurse Education Today vol 48, January 2017, pp 1-6

Objective

To explore the influence of the Amulet artwork and exhibition on midwifery students' perceptions of caring for parents experiencing perinatal death.

Design

A descriptive qualitative design involving face-to-face semi-structured interviews following institutional ethical approval.

Setting

A regional Maternity Hospital in Ireland which hosted the National Artwork and Exhibition exploring the hidden world of infant death.

Participants

A purposive sample of six consenting post registration midwifery students who had attended the Amulet artwork and exhibition.

Findings

Four core themes emerged and these were i) entering the mother's world and hearing her pain; ii) the journey of grief and connecting with the bereaved parent's unique experience; iii) facing the challenge of providing effective perinatal bereavement care; and iv) maintaining a journey of compassionate practice.

Conclusion and implications for practice

Exposure to, and reflection on the Amulet artwork and exhibition increased students' awareness and insight into the non-linear nature of the grieving process, and to the importance of maintaining a journey of compassionate care for parents experiencing perinatal death. The findings suggest that the use of creative women-centered strategies promote affective learning in relation to perinatal death and so may be of use to educators and maternity care providers. (27 references) (Author)

20180105-7*

Basic educational needs of midwifery students for taking the role of an assistance in disaster situations: A cross-sectional study in Iran. Taghizadeh Z, Khoshnam Rad M, Montazeri A (2017), Nurse Education Today vol 51, April 2017, pp 96-101

Background

After disasters, the disaster medical assistance team composed of skilful healthcare staff should be available at the disaster site for providing care to disaster's victims. It is believed that midwives are at the front line of the disaster management team and should be prepared for providing care to mothers and children.

Objectives

To investigate the midwifery students' basic educational needs for taking the role of an assistant in disaster situations.

Design

A cross-sectional study was conducted in an urban area of Iran, in year 2015.

Participants

Two hundred and thirty-one final-year midwifery students with bachelor and master degrees in midwifery participated in this study.

Setting and Samples

The samples were chosen using a census method from four nursing and midwifery schools affiliated with four medical sciences universities in Tehran, Iran.

Methods

The informed consent form was signed by the samples before data collection. The samples were asked to fill out the researcher's made questionnaires consisting of the demographic data form and the basic educational needs for taking

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the role of an assistant in disaster situations. The later was consisted of two parts: 'coping with disaster situations' and 'performing the triage'. The data were analysed using descriptive and inferential statistics via the SPSS software for Windows.

Results

The mean score of coping with disaster situations was 31.3 ± 8.2 (out of 45). Also, the mean score of performing the triage was 14.6 ± 11.8 (out of 20). It was found that 68.8 and 74% of the students in coping with disaster situations and performing the triage, respectively had high and very high educational needs. The highest educational need was reported in the areas of 'time management' and 'the use of equipment in disaster situations'. About 86.8% of the students declared that academic education did not prepared them for taking roles in disaster situations. Only 10.6% passed educational courses about disasters before and 11.5% had the work experience in disaster situations. There was a statistically significant relationship between the students' age ($P = 0.01$), participation in educational courses ($P = 0.005$) and the work experience in disaster situations ($P = 0.04$) and educational needs.

Conclusions

Our findings showed that the midwifery students had high needs for education regarding disaster situations. Therefore, the incorporation of disaster management content in the midwifery degree curricula is suggested. (32 references) (Author)

20180105-15*

An exploratory qualitative analysis of student midwives views of teaching methods that could build their confidence to deliver perinatal bereavement care. Hollins Martin CJ, Robb Y, Forrest E (2016), Nurse Education Today vol 39, April 2016, pp 99-103

Background: Equipping student midwives with confidence to deliver bereavement care to childbearing women is a challenge for midwifery lecturers.

Objective: To explore qualitative data provided by student midwives who evaluated the workbook Bereavement care for childbearing women and their families (Hollins Martin & Forrest, 2013) to explore their views of potential teaching strategies that could build their confidence to deliver real bereavement care.

Method: An exploratory qualitative thematic analysis was used to provide, analyse and report themes identified within data collected in a prior study.

Participants: Participants were student midwives ($n = 179$) in their second/third year of a midwifery degree program at 1 of 3 universities in the UK were included in the study.

Data collection/analysis: Data to evaluate effectiveness of the bereavement workbook as a teaching method was collected using a survey instrument. It was the comments written under questions by participants that were analysed in the present study.

Findings: Three themes emerged: (1) increasing classroom interaction, (2) the importance of reflecting on emotions, and (3) need for experience.

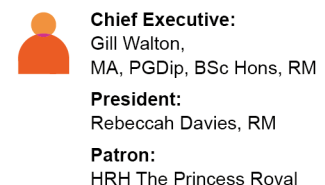
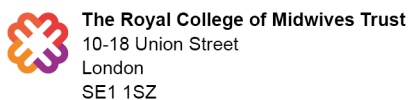
Discussion: Although this study has addressed delivery of education that relates to midwives, the findings are cross transferable to other healthcare educators, practitioners, and students. Several solutions are proposed that could potentially build student confidence to deliver bereavement care: lecturers should (1) encourage group discussion in the classroom to help build student confidence to emotionally cope during real bereavement events; (2) ensure students gain exposure by encouraging qualified midwives to include them in real bereavement events early on in their training, and (3) develop packages of perinatal bereavement scenarios for simulation and rehearsal in the clinical skills laboratory. Post-implementation, it is recommended that these teaching strategies be evaluated. (22 references) (Author)

20180105-12*

Factors that influence nursing and midwifery students' intentions to study abroad: A qualitative study using the theory of planned behaviour. Kelleher S, Fitzgerald S, Hegarty J (2017), Nurse Education Today vol 44, September 2016, pp 157-164

Background

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Future health care professionals need to be broadly-educated, adaptable individuals who have significant experience in the world beyond the classroom. Study abroad is an ideal means of developing some of the skills and attitudes that are not only valued among health professionals, but also have global applicability. Although internationalisation through study abroad is widely publicised as a preferred means of developing globally competent third level graduates very little is known about the factors that influence students' predisposition to study abroad, students decision making process and how various factors influence that process.

Objectives

To explore the motivating factors that influence nursing and midwifery student's intentions to study abroad.

Design

Qualitative descriptive.

Setting

A third level institution in Ireland.

Participants

A purposive sample (n = 25) of undergraduate nursing and midwifery students.

Methods

Data were obtained individually and in a free response format by means of an open ended belief elicitation questionnaire. The theory of planned behaviour was used a theoretical framework to guide both the structure of the questionnaire and the content analysis.

Results

The study's findings support earlier works in identifying the main behavioural, normative and control factors that influence a student's decision to study abroad and is the first study to recognise enhanced professional identity as a potential benefit of study abroad. Factors such as cultural sensitivity, employability, language and cost emerged as important issues in need of further investigation.

Conclusions

The findings of this study have implications for administrators, academics, and others involved in the development of third level study abroad programmes for nursing and midwifery students. New methods which promote the perceived benefits of study abroad, address the perceived barriers and ultimately increase student participation are needed. (53 references) (Author)

20180103-42

Courage and compassion: the importance of being a caring advocate. Kay C, Rojas S (2018), The Practising Midwife vol 21, no 1, January 2018, pp 12-16

This article aims to explore some of the limitations that student midwives experience within the clinical setting.

Courage and compassion form part of the six basic competencies, commonly known as the six Cs, Compassion is an innate trait, whereas courage is a value that can be fostered. It has been established that students need to protect themselves from compassion fatigue and burnout. Students can achieve this by practising regular self-compassion. Students can be courageous practitioners, but there are concerns that they lack the relevant support. Advocacy is both a legal and ethical requirement of midwifery.

These skills require time to develop and are linked to the self-esteem and confidence of the practitioner. (19 references) (Author)

20180102-47

'TeamUP': An approach to developing teamwork skills in undergraduate Midwifery Students. Hastie CR (2018), Midwifery vol 58, March 2018, pp 93-95

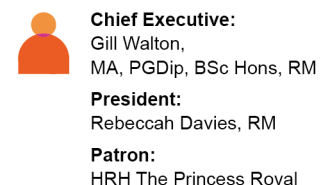
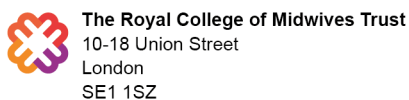
Objective

To develop an effective model to enable educators to teach, develop and assess the development of midwifery students' teamwork skills

Design

An action research project involving participant interviews and academic feedback.

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Setting

A regional university

Participants

Midwifery students (n=21) and new graduate midwives (n=20)

Interventions

A whole of course program using a rubric, with five teamwork domains and behavioural descriptors, to provide a framework for teaching and assessment. Students self and peer assess. Lectures, tutorials and eight different groupwork assignments of increasing difficulty, spread over the three years of the undergraduate degree are incorporated into the TeamUP model.

Findings

The assignments provide students with the opportunity to practice and develop their teamwork skills in a safe, supported environment.

Key conclusions

The social, emotional and practical behaviours required for effective teamwork can be taught and developed in undergraduate health students.

Implications for practice

Students require a clear overview of the TeamUP model at the beginning of the degree. They need to be informed of the skills and behaviours that the TeamUP model is designed to help develop and why they are important. The success of the model depends upon the educator's commitment to supporting students to learn teamwork skills. (Author)

20180102-39

Midwifery students' understanding and knowledge of normal birth before 'delivery' of curriculum. Davison C, Geraghty S, Morris S (2018), *Midwifery* vol 58, March 2018, pp 77-82

Objective

To generate new knowledge that describes and explains the views and understanding, regarding midwifery and normal birth, that newly enrolled midwifery students hold at the commencement of their midwifery education.

Design

A qualitative descriptive approach was used in conjunction with an anonymous questionnaire.

Setting

A tertiary University in Western Australia

Findings

Eighteen postgraduate midwifery students (PG), and twenty undergraduate midwifery students (UG), completed the questionnaire. Postgraduate midwifery students with a nursing background had a pronounced medical terminology and philosophy, as opposed to undergraduate midwifery students.

Implications for practice

Midwifery educators will need to ensure the teaching of midwifery philosophy and normal birth at the commencement of midwifery courses, before historical perspectives and anatomy and physiology. Students need to be aware that birth is not reliant on risk management or student's personal values, otherwise it will be difficult for new midwifery students to understand birth as a normal, physiological process. (27 references) (Author)

20171221-28

Experiences of Canadian students at Birthwise Midwifery School. Shah J (2017), *Midwifery Matters* vol 4, no 2, Fall 2017, pp 14-19

This study examines the triumphs and challenges of Canadian midwifery students who have studied or are currently studying direct-entry midwifery at Birthwise Midwifery School in the United States. This study also looks at (when applicable) their experiences with bridging back to Canada. Phone interviews were conducted with twelve past and present Canadian students of Birthwise Midwifery School in Bridgton, Maine, US. Birthwise is a Midwifery Education Accreditation Council (MEAC) accredited, 3 year direct-entry midwifery training program. Interviews address students' motivations for choosing this route of education, style of preceptorship and lifestyle choices during schooling and

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after graduation. Their narratives are analyzed for themes to offer insight into the Canadian student experience. The findings identify gaps, misinformation and concerns that need to be addressed so that future/current Canadian students are better prepared and have realistic expectations while studying direct-entry midwifery in the US. Recommendations for direct-entry midwifery education programs in the US are provided to better support faculty and Canadian students alike. (16 references) (Author)

20171220-27*

Reliability of student midwives' visual estimate of blood loss in the immediate postpartum period: A cross-sectional study. Parayre I, Rivière O, Debost-Légrand A, et al (2015), International Journal of Nursing Studies vol 52, no 12, December 2015, pp 1798-1803

Background

In France, postpartum hemorrhage (blood loss ≥ 500 mL in the first 24 h postpartum) is the leading direct obstetric cause of maternal mortality. In French practice, PPH is mainly diagnosed by a quantitative assessment of blood loss, performed by subjective methods such as visual estimates. Various studies have concluded that visual estimates are imprecise, tend to underestimate blood loss, and thus to delay diagnosis of PPH.

Objectives

The principal objective of this study was to assess the accuracy of visual estimates of blood loss by student midwives. The secondary objectives were to study intraobserver agreement of these assessments, to assess the accuracy of visual estimates for threshold values, and to look for a region effect.

Design

A cross-sectional multicentre study.

Setting

All French midwifery schools (n = 35).

Participants

Volunteer French student midwives at their fifth (final) year (n = 463).

Methods

The online questionnaire contained 16 photographs (8 different, each presented twice) of simulated volumes of blood loss (100, 150, 200, 300, 500, 850, 1000, and 1500 mL). A 50-mL reference standard for calibration accompanied each photograph. Only one answer could be selected among the 7 choices offered for each photograph. Comparisons used χ^2 and Kappa tests.

Results

The participation rate was 48.43% (463/956), and 7.408 visual estimates were collected. Estimates were accurate for 35.34% of the responses. The reproducibility rate for the visual estimates ($0.17 \leq \kappa \leq 0.48$) and for the accurate visual estimates ($0.11 \leq \kappa \leq 0.55$) were moderate for 4 of the 8 volumes (100, 300, 1000, and 1500 mL). The percentage of accurate responses was significantly higher for volumes ≤ 300 mL than for those ≥ 500 mL (52.94% vs. 17.17%, $p < 0.0001$) and those ≥ 1000 mL (52.94% vs. 18.30%, $p < 0.0001$). The percentage of accurate responses varied between the regions ($p = 0.042$).

Conclusion

Despite the help of a visual aid, both the accuracy and reproducibility of the visual estimates were low. (Author)

20171218-13

Achieving universal coverage: understanding barriers to rural placement for final year midwifery students. Lori JR, Moyer CA, Dzomeku V, et al (2018), Midwifery vol 58, March 2018, pp 44-49

Objective

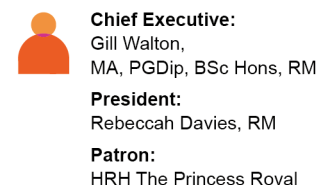
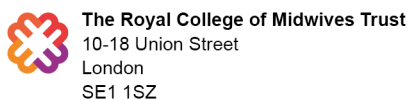
The objective of this study is to understand the barriers final year midwifery students face when deciding to practice in a rural, deprived area.

Design

A cross-sectional study design using a computer based structured survey.

Setting

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15 of the 16 publicly funded midwifery colleges across all ten regions in Ghana.

Participants

A national sample of final-year midwifery students from publically funded midwifery colleges in Ghana.

Measurements

Basic frequencies and percentages were calculated for the variables cited as the top three factors motivating participants to study midwifery stratified by student type (post-basic verses diploma) and program location (urban, peri-urban, and rural). Odds ratios were calculated using separate logistic regression models to analyze the relationship between students' experience with rural communities and how it affected their willingness to work in a rural area following graduation.

Findings

Eight hundred and fifty-six midwifery students (N=856) completed a computerized survey for a response rate of 91.8%. The top motivation to study midwifery was a 'desire to help others'. Over half (55%) of participants reported they will 'definitely work' (11%) or 'were likely to work' (44%) in a deprived area. When examined by student type and location of school, the top reason cited by participants was 'to serve humanity'. Those born in a rural area, currently living in a rural area, or under obligation to return to a rural or peri-urban area had greater odds of being willing to work in a deprived area after graduation.

Key Conclusions

Findings from our study are unique in that they examine the distinct motivational factors from a national sample of midwifery students about to join the workforce. Regardless of the type of student or the location of the school, midwifery students in Ghana were highly motivated by altruistic values. Strategies to address the rural shortage of midwifery providers in Ghana is presented.

Implication for Practice

Understanding the factors that motivate midwifery students to work in rural, deprived areas will help develop effective policy interventions affecting practice. (Author)

20171212-44

Vicarious birth trauma and post-traumatic stress disorder: Preparing and protecting student midwives. Power A, Mullan J (2017), British Journal of Midwifery vol 25, no 12, December 2017, pp 799-802

Post-traumatic stress disorder was first recognised in war veterans who had experienced extreme violence during military combat; however, it is now understood to be caused by a wide range of traumatic experiences, including serious accidents, abuse, natural disasters or terrorist attacks-any event in which a person fears for their life.

Traumatic childbirth is also a potential cause, not only for the mother, but also for those who may witness the birth, such as midwives, student midwives, obstetricians and birth partners. This condition is termed vicarious birth trauma. This article will examine the definition of both vicarious birth trauma and post-traumatic stress disorder, and consider the evidence in relation to how these conditions affect midwives and student midwives. It will offer suggestions for personal and organisational management and support strategies, based on research findings and expert advice. (14 references) (Author)

20171207-18*

The CNO Commission on widening participation in nursing and midwifery education and careers. Final report. Scottish Government (2017), Scottish Government December 2017

Report from the Scottish Government's Chief Nursing Officer on the challenges and opportunities of encouraging and supporting widening participation in nursing and midwifery education and careers, forming part of wider work to ensure Scotland's nursing and midwifery workforce is sustainable and fit for the future. (MB)

Full URL: <http://www.gov.scot/Resource/0052/00528586.pdf>

20171205-8

Student voice: An eager intern. Gower A (2017), Midwives vol 20, Winter 2017, p 28

Keen to improve standards of care for women and babies, Alys Gower describes her internship at WHO. (Author)

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20171201-20

Student survival guide 4: A place for student resilience. Grice L (2017), *The Practising Midwife* vol 12, no 11, pp 14-17

In this fourth article of the series, Lynsey Grice explores resilience and what it means in relation to midwifery. This article goes some way to explaining what resilience is, why it is important in midwifery, and whether midwives can be resilient all the time. (Author)

20171109-11

Surviving second year studies. Axcell C (2017), *British Journal of Midwifery* vol 25, no 7, July 2017, p 474

Many students find their midwifery course as challenging as it is rewarding. Claire Axcell, winner of the BJM Student Midwife of the Year award 2017, reflects on her second year of study. (2 references) (Author)

20171108-151

Experiences and expectations of student midwives entering the final year of their programme of study. Power A (2016), *British Journal of Midwifery* vol 24, no 12, December 2016, pp 867-869

Although theoretical assessment is linear throughout the pre-registration midwifery programme, anecdotal evidence suggests there is a disproportionate increase in student midwives' expectations as they enter their third year of study, knowing they are closer to qualification and the associated responsibilities of autonomous practice. The Nursing and Midwifery Council states that pre-registration midwifery programmes must be at least 3 years or the equivalent to 156 weeks full-time, but there is anecdotal evidence of a culture of expectation that students should be proficient from the start of their third year. This article explores the experiences and expectations of student midwives who have just commenced their final year of training and-in the context of a rising birth rate, increasing workloads and staff shortages-consider how they can be best supported by education and placement providers to successfully complete their studies and ultimately be admitted to the register. (Author)

20171027-14*

Strategies for improving the experiences of Māori students in a blended Bachelor of Midwifery programme. Patterson J, Newman E, Baddock S, et al (2017), *New Zealand College of Midwives Journal* no 53, December 2017, pp 45-52

Introduction: The New Zealand Māori population is predicted to increase to 16.6% of the total population by 2021 and more Māori midwives are needed.

Aim: The aim of this research was to ask Māori students about their experiences in the Bachelor of Midwifery programme and to identify strategies to optimise success for Māori students in becoming midwives.


Method: A participant research project was designed and undertaken, on behalf of the Midwifery School at Otago Polytechnic in New Zealand, by a Māori researcher, who was guided by Tuhiwai-Smith's seven codes of conduct. Nine of a possible 22 students who self-identified as Māori consented to participate. Ethical approval for the study was granted by the Otago Polytechnic Ethics Committee, following consultation with the Kaitohutohu's (Māori advisor) office which provided support for the Māori researcher.

Findings: The Māori students appreciated the opportunities afforded by the blended midwifery programme model, such as the range of learning modes and being able to study in their home areas. The students were challenged by aspects of the programme organisation, the learning environment, student placements and assessments, the lack of Māori visibility, and aspects of the support for Māori students. Recommendations were offered by the students for changes that would improve the learning experience for Māori.


Conclusion: Incorporation of the recommended changes has the potential to improve the learning culture for Māori students in this midwifery programme. This includes changes to the programme organisation and developing a learning environment that more visibly celebrates bicultural identity; thereby decreasing the attrition rate for Māori students in the programme, increasing the number of Māori midwives registering, and contributing to the richness, success and enjoyment of the programme by all students. (43 references) (Author)

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20171024-101

Midwifery apprenticeship in the United Kingdom: where homebirth choice is protected as a human right. Williams N (2017), *Midwifery Today* no 123, Autumn 2017, pp 15-19

An American midwife describes her two-year apprenticeship with the Yorkshire Storks Midwifery Collective in northern England. She compares the role of the midwife in the United States of America and the United Kingdom, the education system, and the state of the profession. The author was able to attend conferences alongside British midwives, exchange clinical skills, attend home births, and take part in NHS protests and political activism, gaining a considerable education in British independent midwifery. (7 references) (KRB)

20171023-8*

Attitudes, beliefs and comfort levels of midwifery students regarding sexual counselling in Turkey. Ören B, Zengin N, Yazıcı S, et al (2018), *Midwifery* vol 56, January 2018, pp 152-157

Objective

This aim of this study was to determine midwifery students' attitudes and beliefs regarding sexual counselling, the factors preventing effective sexual counselling and comfort levels towards sexual counselling.

Participants

The study was conducted with 650 students studying in the midwifery departments of eight universities in Turkey (response rate 59.1%).

Design

The data were obtained through a self-administered questionnaire in early 2016, which collected sociodemographic characteristics and comfort levels, and used the Sexuality Attitudes and Beliefs Survey.

Findings

Just over half (52.4%) of the students had been confronted in clinical practice with caring for a woman who reported having sexual problems and 74.9% reported that the women they were caring for requested sexual counselling from them. Just under a half (48.8%), stated that midwives talk about these issues during care and a similar proportion (48.3%) reported that issues about sexual counselling were part of their midwifery education. Just over half (53.5%) of the midwifery students stated that sexuality is a very special subject to discuss with women but that insufficient time created a barrier to being able to discuss sexual problems. The students did not feel comfortable counselling all women, including homosexual women or sex workers who may be potentially carrying HIV.

Conclusions

Even though the attitudes of midwifery students toward sexual counselling were good, students were not always comfortable to provide counselling, especially to particular groups of women.

Implications for practice

Attitudes, beliefs and comfort levels of midwifery students about sexuality and sexual counselling can be improved. Students are an important group to target as they are specialised in women's health, Different groups should be supported through training concerning sexual counselling. (43 references) (Author)

Full URL: [http://www.midwiferyjournal.com/article/S0266-6138\(17\)30126-2/fulltext](http://www.midwiferyjournal.com/article/S0266-6138(17)30126-2/fulltext)

20171017-82

Student midwives' experiences in relation to assessment of maternal postnatal genital tract health: A case study analysis. Larkin V, Smith G, Tennant J, et al (2018), *Midwifery* vol 56, January 2018, pp 61-69

Objective

to explore student midwives' experiences of postnatal genital tract assessment within midwifery preregistration curricula.

Design

a single, instrumental case study design was employed involving final year student midwives. Ethical approval was gained from the Higher Education Institution at the data collection site. Sampling was purposeful and data were collected using a survey (n=25); narrative style in depth interviews (n=11), review of programme documentation and a

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student midwife / researcher data workshop.

Setting

one Higher Education Institution in the north of England.

Findings

three themes were identified from the data analysis, awareness of assessment methods, accessing learning opportunities and actualisation of learning. The awareness theme highlights that most students were aware of potential signs and symptoms associated with genital tract assessment and health however; difficulties were identified concerning assessment of lochia, encountering sequential assessments and recognising potential for deterioration. This awareness was influenced by access to practice based learning opportunities. Access differed due to variation in postnatal provision, service pressures and variety in mentor practices regarding selecting and creating learning opportunities. This study suggests actualisation of learning and confidence in genital tract assessment was achieved when opportunities to integrate theory and practice occurred. Actualisation was hindered by limited allocation of curriculum time specifically for postnatal maternal assessment content and assessment strategies in comparison to other aspects of midwifery knowledge.

Conclusions

student midwives' experiences, awareness and learning actualisation varied in relation to the development of knowledge and confidence in maternal postnatal genital tract assessment. While clinical and theoretical learning opportunities were available, access and experience varied and limitations were identified. A number of recommendations are outlined to enhance the students learning experiences in practice and HEI settings, which address placement planning, mentor preparation, the student voice and supporting curricula documentation. (54 references) (Author)

20171003-46

Student survival guide 2: Practice placements. Ali A, Matthews A (2017), The Practising Midwife vol 20, no 9, October 2017, pp 14-17

In the second article of this new series, Afshan Ali and Anna Matthews provide advice on how to approach practice placements. This includes practical tips on what to take with you and what might be expected of you when you get there, as well as how to prepare for reflection, relating to your mentor and coping with challenges. (14 references) (Author)

20170926-17*

Nursing associates on pilots set to join register 'without qualification currently approved by NMC'. Merrifield N (2017), Nursing Times 25 September 2017

Nursing associates trained through pilot programmes that began this year will be able to register with the Nursing and Midwifery Council in the future, despite the fact they will not have gained an NMC-approved qualification. (Author, edited)

20170919-25

Student survival guide 1. In the beginning: getting off to the best start as a student midwife. Baker S, Webster L (2017), The Practising Midwife vol 20, no 8, September 2017, pp 17-20

In the first article of this new series, Sarah Baker and Louise Webster provide advice on how to get off to the best start as a new student at university. This includes practical tips on how to 'hit the ground running', as well as how to prepare for university, liaising with lecturers, peers, budgeting, applying for funding, wider university life, how to get yourself involved and time management. (11 references) (Author)

20170914-6

Mentorship is crucial. Bannister L (2017), Midwives vol 20, Autumn 2017, p 29

Wanting to support first years, Lucy Bannister started a buddy scheme, and soon saw the benefits. (Author)

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20170914-15

Cash crisis. Campbell S (2017), *Midwives* vol 20, Autumn 2017, pp 58-60

The new cohort of student midwives must pay tuition fees and take on more loans to pay for day-to-day living. Already there are signs some students may not be willing to saddle themselves with so much debt, writes Sarah Campbell. (Author)

20170823-30*

New graduate job applications and interviews: The role of higher education facilities for student nurses and midwives. Meller N, Blythe S, McNally S (2017), *Australian Nursing and Midwifery Journal* vol 25, no 2, August 2017, p 36

Higher education strategic plans are increasingly focussed on employability outcomes for students, and for students graduating with a degree in nursing or midwifery, employment is not necessarily guaranteed. (Author)

20170810-60

To whom it may concern. Dawkins K (2017), *British Journal of Midwifery* vol 25, no 8, August 2017, p 542

Coming to the end of her midwifery training, Kelly Dawkins writes to students past and present about the realities of midwifery education, and how student midwives may feel. (Author)

20170810-55

Coping with end-of-year assessments: a survival guide for pre-registration midwives. Power A, Murray J (2017), *British Journal of Midwifery* vol 25, no 8, August 2017, pp 531-532

The midwifery preregistration programme of study is a demanding undertaking that prepares students for the stressors and complexities of the role of the qualified midwife. Additionally, there are 'pinch points' during each academic year, where the pressures of theory and practice assessments can lead to students feeling overwhelmed and unable to cope. While multiple submissions due on or around the same time may seem excessive, as students cannot be assessed on what they have not learned, this inevitably leads to a heavy assessment schedule towards the end of each academic year. This article will complement existing literature by suggesting self-help techniques such as relaxation, exercise and making use of existing support networks, along with signposting to useful online resources for students to access during particularly stressful times of their training.

(9 references) (Author)

20170804-8*

Using small tutorial groups within a blended Bachelor of Midwifery programme: Bridging the theory-practice divide.

Kensington M, Davies L, Daellenbach R, et al (2017), *New Zealand College of Midwives Journal* no 53, December 2017, pp 38-44


Background: In 2009 an innovative Bachelor of Midwifery programme was introduced using a blended delivery model to enable students to study and gain practice experience within their own communities. Students learn much of the theoretical content from their homes through access to online resources and virtual classrooms. In recognition for the potential of social isolation and to encourage cooperative learning between student and lecturer, a modified version of the Oxford Tutorial model was adopted. Students meet in small tutorial groups in their areas each week with a locally employed lecturer, and attend scheduled block study weeks on campus throughout the year.

Aim: To critically evaluate the introduction of this programme.


Method: A participatory action research methodology was used in which students' views were gathered through anonymous questionnaires and focus group interviews. Ethics approval was gained through Ara Human Research Ethics Committee. The particular focus of this article is the students' views in relation to the small group tutorials.

Findings: We found that small group tutorials are helpful in assisting students to manage feelings of isolation and the competing demands of home life and study. Students developed a community of inquiry which was pivotal to negotiating the gap between theory and clinical practice: what they are taught and what they see in midwifery

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settings.

Conclusion: The research found that the midwifery tutorial model is valued by all students and seen as the 'hub' of the programme, effectively bridging the gap between theory and practice. (28 references) (Author)

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20170726-127

Supporting student practice: Reflections on the first University of Canberra International Midwifery Student

Placement in Vinh Long, Vietnam. Lewis E (2017), Australian Midwifery News vol 17, no 2, Winter 2017, pp 54-55

A brief account of a two-week clinical placement for Australian student midwives in a hospital in Vietnam. Describes the maternity department, focusing on its physical layout and basic equipment; and includes observations on the hospital's labour and birthing practices and care. Most women gave birth in the supine position, and had episiotomies as soon as the infant's head crowned so the baby could be lifted out. The students introduced skin-to-skin contact to mothers and midwives, and provided breastfeeding workshops. (KRB)

20170726-109

Back to midwifery basics: to be a midwife. Homel N (2017), Australian Midwifery News vol 17, no 2, Winter 2017, pp 21-22

A personal reflection on the experience of being a midwife, particularly the concept of woman-centred care. Encompasses midwives' autonomy, and the self-empowerment it delivers; the role of the midwife as advocate for social and political justice and equity for women and families; and the recognition of midwifery itself as a form of social justice. (9 references) (KRB)

20170725-89

Disorientation, self-awareness and ongoing learning: student midwives' experiences of clinical placements in Italy.

Borrelli S, Cattaneo A, Recalcati R, et al (2017), MIDIRS Midwifery Digest vol 27, no 3, September 2017, pp 391-397

Objective: To explore student midwives' perspectives, experiences and concerns regarding clinical placements in the Italian setting.

Design: A qualitative phenomenological study was undertaken, with data collected through semi-structured interviews and diaries. Ethical approval was obtained. Data analysis was conducted using a thematic analysis approach.

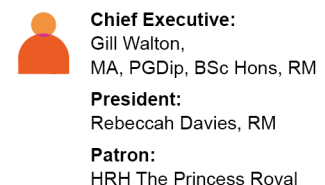
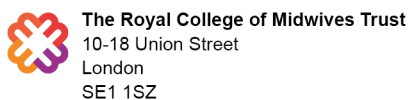
Setting: One university in Northern Italy including a midwifery undergraduate programme.

Participants: Purposeful sample of 19 third-year student midwives.

Findings: Four themes emerged from the data: a) becoming a midwife: disorientation, self-awareness and ongoing learning; b) mentor as key figure; c) practice and theory: a 'chicken and egg' situation; d) clinical placements: a window on the uniqueness of the midwifery profession. Student midwives reported a journey through different learning phases within clinical placements, from feeling disoriented while facing initial challenges in the first year of the course to having increasing awareness of their role in the second and third year of the programme. The phase of disorientation was mainly due to not being aware of the theoretical evidence behind practice, not feeling part of the team, not knowing what their role was and lack of appropriate supervision from mentors. A positive relationship with the mentor encouraged students to share perspectives and doubts, stimulating a problem solving approach. The students found it helpful when the mentor involved them in the decision making and praised them when they deserved it. A good rapport with the midwife was reported by the participants as inspiring self-confidence and cognitive enquiries; it also allowed the students to feel part of the multidisciplinary team. An overall sense of ongoing learning was still present at the end of the midwifery programme.

Key conclusions and implications for practice: Continuity of mentorship and mentors' commitment to supporting students emerged as key aspects for a positive and fruitful learning experience within practice settings. Other pivotal elements to be considered by mentors are making the students feel welcome and part of the team; orienting them on the first day of placement; allowing some time for familiarisation with the placement area and clinical policies; involving the students in the decision-making process and care planning/implementation/evaluation. Appropriate

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national mandatory training should be put in place for mentors to allow a more effective learning experience in practice settings for student midwives.

Keywords: mentor; mentorship; midwifery; placement; student midwife; undergraduate. (30 references) (Author)

20170725-54

An exploratory qualitative study into student midwives' experience of learning to support mothers to exclusively breastfeed their babies. Agbakoba Ssengabadda P (2017), MIDIRS Midwifery Digest vol 27, no 3, September 2017, pp 359-366

This exploratory qualitative study investigates eight student midwives' experiences of pre-registration training on exclusive breastfeeding (EBF) and their subsequent sense of preparedness to support mothers in this practice.

Participants were third year student midwives at the author's university and their knowledge and practices experienced during their training were explored. (29 references) (Author)

20170725-52

Dementia training for student midwives: development of an educational resource. Britt S (2017), MIDIRS Midwifery Digest vol 27, no 3, September 2017, pp 318-322

There is a moment in the film Still Alice (2015), when a new mother and father celebrate the birth of their twin babies alongside the new grandparents. As one of the babies is handed to the grandmother, there is a nervous exchange of glances between the new parents, as they seem to consider the safety of their newborn. The moment is a poignant one because the grandmother has been diagnosed with early-age onset dementia, with the film charting the devastation that her condition causes to herself and her wider family. It is a devastation, of which many families are acutely aware and one which might present midwifery with a hitherto less explored area of family care. This article describes how an awareness of such issues surrounding dementia was incorporated into a midwifery undergraduate education module, in order to meet the demands of the mandate to Health Education England (HEE) as set down in the Prime Minister's Challenge on Dementia 2020 (Department of Health (DH) 2015). (21 references) (Author)

20170714-15*

'Has it really been three years since I started my midwifery degree?' Merrick A (2017), Nursing Times 3 July 2017

As she sits down to write her blog following a night shift, midwifery editor Anna Merrick, realises that the proximity of graduation is causing her and her peers' grasp on time to become somewhat shaky. (Author)

20170711-9*

Peer to peer mentoring: Outcomes of third-year midwifery students mentoring first-year students. Hogan R, Fox D, Barratt-See G (2017), Women and Birth: Journal of the Australian College of Midwives vol 30, no 3, June 2017, pp 206-213

Problem

Undergraduate midwifery students commonly experience anxiety in relation to their first clinical placement.

Background

A peer mentoring program for midwifery students was implemented in an urban Australian university. The participants were first-year mentee and third-year mentor students studying a three-year Bachelor degree in midwifery. The program offered peer support to first-year midwifery students who had little or no previous exposure to hospital clinical settings. Mentors received the opportunity to develop mentoring and leadership skills.

Aim

The aim was to explore the benefits, if any, of a peer mentoring program for midwifery students.

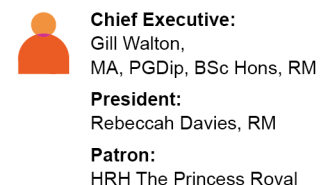
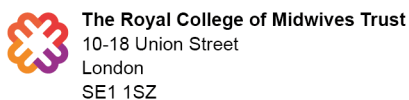
Methods

The peer mentoring program was implemented in 2012. Sixty-three peer mentors and 170 mentees participated over three academic years. Surveys were distributed at the end of each academic year. Quantitative survey data were analysed descriptively and qualitative survey data were analysed thematically using NVivo 10 software.

Findings

Over 80% of mentors and mentees felt that the program helped mentees adjust to their midwifery clinical placement.

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At least 75% of mentors benefited, in developing their communication, mentoring and leadership skills. Three themes emerged from the qualitative data, including 'Receiving start-up advice'; 'Knowing she was there' and 'Wanting more face to face time'.

Discussion

There is a paucity of literature on midwifery student peer mentoring. The findings of this program demonstrate the value of peer support for mentees and adds knowledge about the mentor experience for undergraduate midwifery students.

Conclusion

The peer mentor program was of benefit to the majority of midwifery students. (21 references) (Author)

Full URL: [http://www.womenandbirth.org/article/S1871-5192\(17\)30103-8/fulltext](http://www.womenandbirth.org/article/S1871-5192(17)30103-8/fulltext)

20170711-14*

The experiences of last-year student midwives with High-Fidelity Perinatal Simulation training: A qualitative descriptive study. Vermeulen J, Beeckman K, Turcksin R, et al (2017), Women and Birth: Journal of the Australian College of Midwives vol 30, no 3, June 2017, pp 253-261

Background

Simulation training is a powerful and evidence-based teaching method in healthcare. It allows students to develop essential competences that are often difficult to achieve during internships. High-Fidelity Perinatal Simulation exposes them to real-life scenarios in a safe environment. Although student midwives' experiences need to be considered to make the simulation training work, these have been overlooked so far.

Aim

To explore the experiences of last-year student midwives with High-Fidelity Perinatal Simulation training.

Methods

A qualitative descriptive study, using three focus group conversations with last-year student midwives (n = 24). Audio tapes were transcribed and a thematic content analysis was performed. The entire data set was coded according to recurrent or common themes. To achieve investigator triangulation and confirm themes, discussions among the researchers was incorporated in the analysis.

Findings

Students found High-Fidelity Perinatal Simulation training to be a positive learning method that increased both their competence and confidence. Their experiences varied over the different phases of the High-Fidelity Perinatal Simulation training. Although uncertainty, tension, confusion and disappointment were experienced throughout the simulation trajectory, they reported that this did not affect their learning and confidence-building.

Conclusion

As High-Fidelity Perinatal Simulation training constitutes a helpful learning experience in midwifery education, it could have a positive influence on maternal and neonatal outcomes. In the long term, it could therefore enhance the midwifery profession in several ways. The present study is an important first step in opening up the debate about the pedagogical use of High-Fidelity Perinatal Simulation training within midwifery education. (28 references) (Author)

Full URL: [http://www.womenandbirth.org/article/S1871-5192\(17\)30088-4/fulltext](http://www.womenandbirth.org/article/S1871-5192(17)30088-4/fulltext)

20170711-12*

Development of a Model of Holistic Reflection to facilitate transformative learning in student midwives. Bass J, Fenwick J, Sidebotham M (2017), Women and Birth: Journal of the Australian College of Midwives vol 30, no 3, June 2017, pp 227-235

Background

Reflective practice is considered an essential aspect of personal and professional development, and critical reflection is considered the cornerstone of being an accountable and autonomous practitioner. Tertiary education should lay the foundations of lifelong learning by ensuring students develop into critically reflective and reflexive practitioners, who demonstrate self-awareness and an ability to reflect on personal values and beliefs and their impact on the wider healthcare system. This level of reflective practice is essential to effect change at both an individual and societal level. Reflection should therefore be embedded into education programs as a learning, teaching and assessment strategy.

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Aim

The aim of this paper is to describe a structured Model of Holistic Reflection embedded within an Australian Bachelor of Midwifery Program. The paper firstly outlines the theoretical and conceptual underpinnings of the newly developed model. Secondly describes the six integrated and inter-dependant phases of the model.

Discussion and conclusion

The aim of developing the Holistic Reflective Model was to produce a sound educational tool to assist midwifery students to progressively build reflexivity and reflective practice. Furthermore, provide midwifery academics with an educational resource to facilitate development of reflective and critical thinking skills in students. The specific intention was to promote deep personal and transformative learning across an entry to practice program. This paper highlights a number of ways the model can be embedded within the curriculum to support the scaffolded development of critical reflection and reflexivity required to facilitate transformative learning. While evaluation is required the model may have transferability to other disciplines. (63 references) (Author)

Full URL: [http://www.womenandbirth.org/article/S1871-5192\(17\)30077-X/fulltext](http://www.womenandbirth.org/article/S1871-5192(17)30077-X/fulltext)

20170711-10*

Educating student midwives around dignity and respect. Hall JS, Mitchell M (2017), Women and Birth: Journal of the Australian College of Midwives vol 30, no 3, June 2017, pp 214-219

Focus

There is currently limited information available on how midwifery students learn to provide care that promotes dignity and respect.

Background

In recent years the importance of dignity in healthcare and treating people with respect has received considerable emphasis in both a national and international context.

Aim

The aim of this discussion paper is to describe an educational workshop that enables learning to promote dignity and respect in maternity care.

Discussion

An interactive workshop, using different creative methods as triggers for learning will be described. Provision of learning opportunities for students around dignity and respect is important to ensure appropriate care is provided in practice. The use of creative methods to inspire has contributed to deep learning within participants. An evaluation of the workshop illustrated how learning impacted on participants practice. Data to support this is presented in this paper.

Conclusion

The use of creative teaching approaches in a workshop setting appears to provide an effective learning opportunity around dignified and respectful care. These workshops have evoked a deep emotional response for some participants, and facilitators must be prepared for this outcome to ensure a safe space for learning. (40 references) (Author)

Full URL: [http://www.womenandbirth.org/article/S1871-5192\(17\)30182-8/fulltext](http://www.womenandbirth.org/article/S1871-5192(17)30182-8/fulltext)

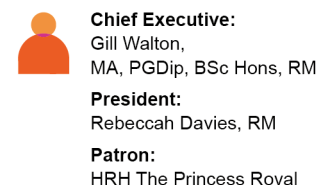
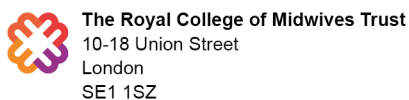
20170630-5

From a rabbit in the headlights to a confident user of research evidence. Evans R (2017), The Practising Midwife vol 20, no 7, July/August 2017, pp 20-22

In this paper student midwife Rachel and her teacher Susanne tell the story of Rachel's journey through her 'research module'. The story offers hope to students and teachers about engaging with research evidence for safe and effective practice. Despite having encountered evidence-based midwifery in previous modules, Rachel doubted her own ability to fully get to grips with the concept and worried that she would be unable to pass her research module. However, advice from her personal tutor and her lecturer centred on undertaking focused reading around the subject - and it is this which enabled her to tackle this module and achieve success. (8 references) (Author)

20170608-24

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Midwifery basics: 8. Becoming an accountable midwife. Shepherd J (2017), The Practising Midwife vol 20, no 6, June 2017, pp 20-23

In the final article of the series, Jancis Shepherd explores some of the challenges of becoming an accountable practitioner. (8 references) (Author)

20170606-39

Midwifery students and routine discussion of birth experience in the early postnatal period in hospital. Knol F, Geraghty S (2017), British Journal of Midwifery vol 25, no 6, June 2017, pp 380-385

It has become increasingly acknowledged that a woman's experience of childbirth can adversely affect her transition to parenthood. Routine discussion of the childbirth experience is not always offered to women in the postnatal period. A postpartum talk, encourages a woman to express her emotional experience, and is an informal discussion of the birth experience with a midwife. This study explores the experiences of hospital-based midwifery students' knowledge and experience of routine discussions of the childbirth experience with women in the postnatal period. Midwifery students stated that they felt they had not received adequate training and education in leading a routine birth discussion with a woman, and they felt they required further knowledge and education to increase levels of confidence in this area. (29 references) (Author)

20170606-32

Do trainee nurse associates have a role in maternity care?. Barker K (2017), British Journal of Midwifery vol 25, no 6, June 2017, pp 348-349

With time and resources stretched, could this newly piloted role-created to bridge the gap between health care assistant and registered nurse-enhance the levels of care midwives can offer to women? (2 references) (Author)

20170508-30

Trust and technology: mothering in a modern age. Simone D (2017), Midwifery Today no 121, Spring 2017, pp 50-51

A sceptical look at technology for parents and babies, specifically a self-rocking bassinet which soothes the baby and reduces the need for parents to pick them up. Argues that such technology undermines the process of infants' adaptation to life outside the womb. (2 references) (KRB)

20170503-19

Perceptions of nearly graduated fourth year midwifery students regarding a 'good midwife' in the Netherlands.

Feijen-de Jong EI, Kool L, Peters LL, et al (2017), Midwifery vol 50, July 2017, pp 157-162

Objective

Midwifery students have the challenge to learn to be autonomous and capable midwives to ensure a safe and emotionally satisfying experience for mothers (to be) and their babies. They have to develop and acquire knowledge and skills for practice, and they have to adopt and internalize the values and norms of the midwifery profession in order to socialize as a midwife. In this study we explored conceptualisations of 'good midwives' among nearly graduated final year midwifery students as a result of their professional socialization process.

Design

A cross-sectional study consisting of an one open-ended question was undertaken. Data was analyzed qualitatively, inductively and deductively by using Halldorsdottir's theory of the primacy of a good midwife.

Setting

One of three midwifery academies in the Netherlands in July 2016 were included.

Participants

All midwifery students (N=67) in their final year were included.

Findings

Student midwives gave broad interpretations of the features of a good midwife. Three themes - next to the themes already conceptualised by Halldorsdottir - were revealed and mentioned by nearly graduated Dutch midwifery

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students. They added that a good midwife has to have specific personal characteristics, organizational competences, and has to promote physiological reproductive processes in midwifery care.

Key Conclusions

Students' views are broad and deep, reflecting the values they take with them to real midwifery practice. The results of this study can serve as an indicator of the level of professional socialization into the midwifery profession and highlight areas in which changes and improvements to the educational program can be made. (16 references) (Author)

20170503-13

A systematic mixed-methods review of interventions, outcomes and experiences for midwives and student midwives in work-related psychological distress. Pezaro S, Clyne W, Fulton EA (2017), *Midwifery* vol 50, July 2017, pp 163-173

Background

within challenging work environments, midwives and student midwives can experience both organisational and occupational sources of work-related psychological distress. As the wellbeing of healthcare staff directly correlates with the quality of maternity care, this distress must be met with adequate support provision. As such, the identification and appraisal of interventions designed to support midwives and student midwives in work-related psychological distress will be important in the pursuit of excellence in maternity care.

Objectives

to identify interventions designed to support midwives and/or student midwives in work-related psychological distress, and explore any outcomes and experiences associated with their use.

Data sources; study eligibility criteria, participants, and interventions This systematic mixed-methods review examined 6 articles which identified interventions designed to support midwives and/or student midwives in work-related psychological distress, and reports both the outcomes and experiences associated with their use. All relevant papers published internationally from the year 2000 to 2016, which evaluated and identified targeted interventions were included.

Study appraisal and synthesis methods

the reporting of this review adhered to the Preferred Reporting Items for Systematic Reviews and Meta-analyses (PRISMA) guidelines. The quality of each study has been appraised using a scoring system designed for appraising mixed-methods research, and concomitantly appraising qualitative, quantitative and mixed-methods primary studies in mixed reviews. Bias has been assessed using an assessment of methodological rigor tool. Whilst taking a segregated systematic mixed-methods review approach, findings have been synthesised narratively.

Findings

this review identified mindfulness interventions, work-based resilience workshops partnered with a mentoring programme and the provision of clinical supervision, each reported to provide a variety of both personal and professional positive outcomes and experiences for midwives and/or student midwives. However, some midwives and/or student midwives reported less favourable experiences, and some were unable to participate in the interventions as provided for practical reasons.

Limitations

eligible studies were few, were not of high quality and were limited to international findings within first world countries. Additionally, two of the papers included related to the same intervention. Due to a paucity of studies, this review could not perform sensitivity analyses, subgroup analyses, meta-analysis or meta-regression.

Conclusions and implications of key findings

there is a lack of evidence based interventions available to support both midwives and student midwives in work-related psychological distress. Available studies reported positive outcomes and experiences for the majority of participants. However, future intervention studies will need to ensure that they are flexible enough for midwives and student midwives to engage with. Future intervention research has the opportunity to progress towards more rigorous studies, particularly ones which include midwives and student midwives as solitary population samples. (52 references) (Author)

Full URL: [http://www.midwiferyjournal.com/article/S0266-6138\(17\)30274-7/fulltext](http://www.midwiferyjournal.com/article/S0266-6138(17)30274-7/fulltext)

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20170419-29

Juggling and prioritising. Stone H (2017), British Journal of Midwifery vol 25, no 4, April 2017, p 270

Heidi Stone, winner of last year's BJM Student of the Year award, reflects on the highs and lows of her preceptorship and her plans for the future. (Author)

20170419-26

How can universities 'ASSIST' student midwives with additional needs to achieve?. Power A, Murray J (2017), British Journal of Midwifery vol 25, no 4, April 2017, pp 258-260

Previous articles have discussed how pre-registration midwifery education should prepare student midwives 'to cope with the complex emotional and physical demands of their chosen profession' (Power, 2016:66); acknowledged the importance of a partnership approach to education through the 'Clinicians in the Classroom' series (Power, 2016; Power and Briody, 2016; Power and Gupta, 2016; Power and Rea, 2016; Power and Rooth, 2016) and considered how best to support student midwives with appropriate learning and teaching strategies (Power and Farmer, 2017). What is yet to be considered is what extra support is available to students who have additional needs, disabilities or medical conditions that might impact on their studies. This article will take the University of Northampton as a case study and review the support services it has in place to support such students to meet their full potential. This service is called The Additional Student Support and Inclusion Services Team (ASSIST). (10 references) (Author)

20170419-24

'Freedom to flourish': University of Salford student midwives' placement link with the Isle of Man. Uppal E, Mitchell JM, Leyland A, et al (2017), British Journal of Midwifery vol 25, no 4, April 2017, pp 253-256

It is recommended that students experience caseloading and continuity models of care as part of their clinical learning (Health Education England, 2013; Nursing and Midwifery Council, 2009). Student midwives from the University of Salford have the option of a placement at the Jane Crookall Maternity Unit in the Isle of Man. This article discusses student midwives' evaluation of an innovative clinical placement on the Isle of Man that facilitates this model of care. This evaluation considers the perspectives of student midwives, service users and midwives following the commencement of this placement link in an island setting that provides continuity of care. (12 references) (Author)

20170329-127

Advocating with confidence; does past experience help?. Chalkwright D, Nurse S (2017), Journal of Neonatal Nursing vol 23, no 2, April 2017, pp 82-85

Advocacy has long been described as an inherent part of our role as nurses. Patient vulnerability is cited as a common reason that nurses assume the role of an advocate and no population is more vulnerable than a sick or premature newborn. In this article Diane Chalkright examines the issues surrounding advocacy for patients, and how her previous experience and current knowledge assisted her in challenging medical decisions whilst acting as an effective advocate for a sick baby in her care. (22 references) (Author)

20170323-12*

'I want to be this hungry, tired third year who just helped deliver a woman's first child'. Merrick A (2016), Nursing Times 17 October 2016

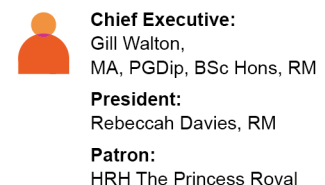
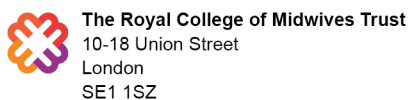
In her first blog as midwifery editor, Anna reflects on how her course has shaped her both as a person and as a midwife. (Author)

20170126-24

The development of an online resource on 'professionalism' for student midwives and student nurses. Todhunter F, Nevin G, Riley S, et al (2017), MIDIRS Midwifery Digest vol 27, no 1, March 2017, pp 20-21

From the outset of their studies, health care students working towards professional registration are required to be

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accountable and responsible for their behaviours and actions at all times. This paper sets out the development of a digital resource, a re-usable learning object (RLO) about the Code of professional standards of practice and behaviour for nurses and midwives (Nursing and Midwifery Council (NMC) 2015). The discussion and resource shows the value of peer-led learning to influence students' understanding of the behaviours and language of professional practice. A resource about professional and public expectations of behaviour that provides opportunities for reflection before action. (4 References) (Author)

20170112-17*

Student midwives' perceptions on the organisation of maternity care and alternative maternity care models in the Netherlands - a qualitative study. Warmelink JC, de Cock TP, Combee Y, et al (2017), BMC Pregnancy and Childbirth vol 17, no 24, 11 January 2017

Background

A major change in the organisation of maternity care in the Netherlands is under consideration, going from an echelon system where midwives provide primary care in the community and refer to obstetricians for secondary and tertiary care, to a more integrated maternity care system involving midwives and obstetricians at all care levels. Student midwives are the future maternity care providers and they may be entering into a changing maternity care system, so inclusion of their views in the discussion is relevant. This study aimed to explore student midwives' perceptions on the current organisation of maternity care and alternative maternity care models, including integrated care.

Methods

This qualitative study was based on the interpretivist/constructivist paradigm, using a grounded theory design. Interviews and focus groups with 18 female final year student midwives of the Midwifery Academy Amsterdam Groningen (AVAG) were held on the basis of a topic list, then later transcribed, coded and analysed.

Results

Students felt that inevitably there will be a change in the organisation of maternity care, and they were open to change. Participants indicated that good collaboration between professions, including a shared system of maternity notes and guidelines, and mutual trust and respect were important aspects of any alternative model. The students indicated that client-centered care and the safeguarding of the physiological, normalcy approach to pregnancy and birth should be maintained in any alternative model. Students expressed worries that the role of midwives in intrapartum care could become redundant, and thus they are motivated to take on new roles and competencies, so they can ensure their own role in intrapartum care.

Conclusions

Final year student midwives recognise that change in the organisation of maternity care is inevitable and have an open attitude towards changes if they include good collaboration, client-centred care and safeguards for normal physiological birth.

The graduating midwives are motivated to undertake an expanded intrapartum skill set. It can be important to involve students' views in the discussion, because they are the future maternity care providers. (Author) [Please note: BMC initially publish articles in a provisional format. If there is a note on the document to indicate that it is still provisional, it may undergo minor changes]

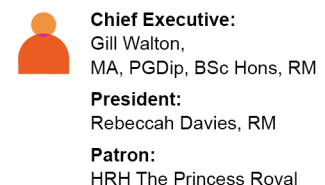
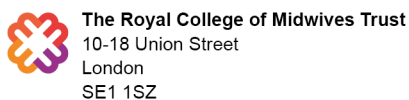
Full URL: <https://bmcpregnancychildbirth.biomedcentral.com/articles/10.1186/s12884-016-1185-4>

20170112-108

The value of elective placements. Quarrell C, Clifford L (2017), The Practising Midwife vol 20, no 1, January 2017, pp 19-22

This article discusses the value of an elective placement, for finalist student midwives, to a range of health care facilities in Uganda. It uses Race's (2015) 'seven factors to facilitate learning' to analyse the effectiveness of elective placements in promoting deep learning and personal development. It is evident from the student evaluation of the placement that both of these outcomes were achieved. However the learning varied, depending on the individual; hence some students focused more on their personal development whilst others recognised the contributing factors which impact on maternity care. The article also identifies that preparation and managing student expectations were key to facilitating a conducive learning environment. This was enhanced by tutor-led interaction and discussion, thus

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encouraging deep learning. The students' experience resulted in a greater awareness of the variation in how individuals are valued and of cultural practices.

(13 references) (Author)

20170109-33*

Depressive symptoms, college adjustment and peer support among undergraduate nursing and midwifery students.

Horgan A, Sweeney J, Behan L, et al (2016), *Journal of Advanced Nursing* vol 72, no 12, December 2016, pp 3081-3092

AIM:

This study aimed to identify levels of depressive symptoms, social and personal college adjustment and peer support among nursing and midwifery students.

BACKGROUND:

Student mental health is of international concern, particularly among students who are undertaking professional qualifications in health care.

DESIGN:

Cross-sectional design.

METHODS:

Data were collected in 2013 using the Centre for Epidemiology Depressive Symptoms Scale, two subscales of the Student Adaptation to College Questionnaire; and a subscale of the Peer Support Evaluation Inventory with 417 students in Ireland.

RESULTS:

Findings indicated that 34% of participants experienced depressive symptoms, 20% were poorly personally adjusted and 9% poorly socially adjusted. Most students had good levels of peer support. Statistically significant relationships were found between all key variables. Students in their second year of study had significantly higher rates of depressive symptoms. Participants who reported having poor relationships with their fathers were at higher risk and had more difficulties personally and socially adjusting to university life and study. The alcohol consumption of participants had a statistically significant relationship with depressive symptoms with higher consumption rates having a positive impact on symptoms.

CONCLUSION:

The mental health of undergraduates undertaking professional healthcare studies needs to be a key research, educational and clinical priority. High rates of adjustment and mental health difficulties, particularly in the second year of the programme need to be examined and more effective interventions developed.

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20161206-61

Training for resilience. Killingley J (2016), *Midwives* vol 19, Winter 2016, pp 52-54

Why are you leaving, you've just got here? An examination of attrition in pre-registration and preceptorship midwives. (Author)

20161206-53

Speaking up and out. Forteath R (2016), *Midwives* vol 19, Winter 2016, p 27

Ren Forteath talks through her experience of making her voice heard as a student. (Author)

20161202-48*

Student midwives and paramedic students' experiences of shared learning in pre-hospital childbirth. Feltham C, Foster

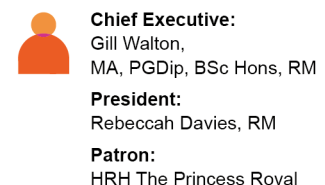
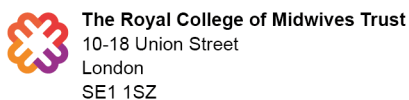
J, Davidson T, et al (2016), *Nurse Education Today* vol 41, June 2016, pp 73-80

AIM:

To explore the experiences of midwifery and paramedic students undertaking interprofessional learning.

METHOD:

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A one day interprofessional learning workshop incorporating peer assisted learning for undergraduate pre-registration midwifery and paramedic students was developed based on collaborative practice theory and simulation based learning. Twenty-five student midwives and thirty-one paramedic students participated in one of two identical workshops conducted over separate days. Videoed focus group sessions were held following the workshop sessions in order to obtain qualitative data around student experience. Qualitative data analysis software (ATLAS.ti) was used to collate the transcriptions from the focus group sessions and the video recordings were scrutinised. Thematic analysis was adopted.

RESULTS:

Four main themes were identified around the understanding of each other's roles and responsibilities, the value of interprofessional learning, organisation and future learning. Students appeared to benefit from a variety of learning opportunities including interprofessional learning and peer assisted learning through the adoption of both formal and informal teaching methods, including simulation based learning. A positive regard for each other's profession including professional practice, professional governing bodies, professional codes and scope of practice was apparent. Students expressed a desire to undertake similar workshops with other professional students.

CONCLUSION:

Interprofessional learning workshops were found to be a positive experience for the students involved. Consideration needs to be given to developing interprofessional learning with other student groups aligned with midwifery at appropriate times in relation to stage of education. (Author)

20161202-39

'Expecting and Connecting' Group Pregnancy Care: evaluation of a collaborative clinic. Craswell A, Kearney L, Reed R (2016), Women and Birth: Journal of the Australian College of Midwives vol 29, no 5, October 2016, pp 416-422

Establishment of a service to increase clinical placement opportunities for midwifery students in a regional area of Queensland, Australia with unknown impact on all service stakeholders.

Background

Group antenatal care (known as Expecting and Connecting) was provided at the university campus, instigated collaboratively between the health service and university in response to population growth and student needs in a health service jurisdiction not otherwise serviced for public pregnancy care.

Question, hypothesis or aim

This study evaluated the 'Expecting and Connecting' Group Pregnancy Care service from the perspective of attending women, midwifery students and midwives.

Methods

Qualitative findings were obtained from mothers, midwives and midwifery students. The study was guided by Donabedian's conceptual framework to assess quality within a health service. Thematic analysis was used to identify themes and concepts from the data within the areas of structure, process and outcome.

Findings

Expecting and Connecting provided benefits to participants including an environment for students and pregnant women to build relationships to meet Continuity of Care requirements for students. Mothers reported high levels of satisfaction with antenatal care including the ability to develop peer support.

Discussion

The collaborative facilitation of group antenatal care by university and health service midwives provided a catalyst to the development of peer support networks within the local community and enhance opportunity for midwifery student requirements.


Conclusion

The 'Expecting and Connecting' group antenatal care service was highly regarded by participant mothers, midwives and midwifery students and provided an additional source of midwifery student placement. (39 references) (Author)


20161201-39

'Am I too emotional for this job?' An exploration of student midwives' experiences of coping with traumatic events

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Background

Midwifery is emotionally challenging work, and learning to be a midwife brings its own particular challenges. For the student midwife, clinical placement in a hospital labour ward is especially demanding. In the context of organisational tensions and pressures the experience of supporting women through the unpredictable intensity of the labour process can be a significant source of stress for student midwives. Although increasing attention is now being paid to midwives' traumatic experiences and wellbeing few researchers have examined the traumatic experiences of student midwives. Such research is necessary to support the women in their care as well as to protect and retain future midwives.

Aim

This paper develops themes from a research study by Davies and Coldridge (2015) which explored student midwives' sense of what was traumatic for them during their undergraduate midwifery education and how they were supported with such events. It examines the psychological tensions and anxieties that students face from a psychotherapeutic perspective.

Design

A qualitative descriptive study using semi-structured interviews.

Setting

A midwifery undergraduate programme in one university in the North West of England.

Participants

11 second and third year students.

Analysis

Interviews were analysed using interpretative phenomenological analysis.

Findings

The study found five themes related to what the students found traumatic. The first theme Wearing the Blues referred to their enculturation within the profession and experiences within practice environments. A second theme No Man's Land explored students' role in the existential space between the woman and the qualified midwives. Three further themes described the experiences of engaging with emergency or unforeseen events in practice and how they coped with them ('Get the Red Box!', The Aftermath and Learning to Cope). This paper re-examines aspects of the themes from a psychotherapeutic perspective.

Key conclusions

Researchers have suggested that midwives' empathic relationships with women may leave them particularly vulnerable to secondary traumatic stress. For student midwives in the study the close relationships they formed with women, coupled with their diminished control as learners may have amplified their personal vulnerability. The profession as a whole is seen by them as struggling to help them to safely and creatively articulate the emotional freight of the role.

Implications for practice

For midwifery educators, a focus on the psychological complexities in the midwifery role could assist in giving voice to and normalising the inevitable anxieties and difficulties inherent in the role. Further research could explore whether assisting students to have a psychological language with which to reflect upon this emotionally challenging work may promote safety, resilience and self-care. (Author)

20161111-11

University midwifery societies: support for student midwives, by student midwives. Power A, Grzelak I (2016), British Journal of Midwifery vol 24, no 11, November 2016, pp 787-789

Student midwives usually begin their programme of study feeling motivated and optimistic, but there is evidence to suggest the stressors of the programme are too much for some students, leading to attrition. Given the current shortage of midwives, additional strategies are required to support student midwives to successfully complete their studies and join the workforce. Student-led societies within universities can offer a support system. A student midwife at the University of Northampton, Ilaria Grzelak, realised that 'traditional' student societies would not meet the specific needs of student midwives, whose course involves not only academic demands but also the challenges of

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clinical practice. She decided to set up a society specifically for midwifery students, which continues to benefit her fellow student midwives. (8 references) (Author)

20161108-26

Experiences of student midwives learning and working abroad in Europe: the value of an Erasmus undergraduate midwifery education programme. Marshall JE (2017), *Midwifery* vol 44, January 2017, pp 7-13

Background

Universities in the United Kingdom are being challenged to modify policies and curricula that reflect the changing global reality through internationalisation. An aspect of internationalisation is study abroad which the European Commission Erasmus exchange programme is just one means of addressing this.

Objective

To explore the experiences of student midwives who are engaged in the Erasmus exchange programme and the effect it has on their learning and working in an international context.

Design

Approval for the small phenomenological cohort study was obtained from two participating universities: the University of Malta and University of Nottingham. Data were collected from 13 student midwives from a total of five cohorts in the form of diaries to explore their experiences of learning and working in another country. Thematic analysis supported by Computer-Assisted Qualitative Data Analysis Software was used to identify five recurrent themes emerging from the data: the findings of which have served further in developing this programme.

Findings

Students valued the opportunity of undertaking study and midwifery practice in another culture and healthcare system, extending their knowledge and development of clinical competence and confidence. For some, this was the first time outside of their home country and adaptation to a new environment took time. Support from their contemporaries, lecturers and midwife mentors however, was overwhelmingly positive, enabling the students to feel 'part of the local university / midwifery team'. By the end of the programme, the students recognised that they had become more independent and felt empowered to facilitate developments in practice when they returned home.

Implications for Education / Practice:

This innovative development embracing internationalisation within the curricula has the potential to increase students' employability and further study within Europe and beyond. It can be used as a vehicle to share best practice within an international context, ultimately making a difference to the quality of care childbearing women, their babies and families experience worldwide. (23 references) (Author)

20161020-14

The hands of midwives: broadening the perspectives of midwifery students through an international clinical placement and experiential tour in Bali, Indonesia. Clasquin T (2016), *Australian Midwifery News* vol 16, no 3, Spring 2016, pp 41-43

In June this year I had the incredible opportunity of taking a group of Charles Darwin University (CDU) midwifery students to Bali to complete a clinical placement and experiential tour as part of their studies on midwifery in the global perspective. This was the first trip of its kind for CDU midwifery students being offered the rare opportunity to work alongside Indonesian students and midwives in providing women-centred care in midwifery led clinics. (Author)

20161018-53*

Experiences of student midwives in the care of women with perinatal loss: a qualitative descriptive study. Alghamdi R, Jarrett P (2016), *British Journal of Midwifery* vol 24, no 10, October 2016, pp 715-722

Background:

Student midwives often encounter perinatal loss, such as stillbirth and neonatal death, as part of their experience of clinical practice. Coping with these events can be challenging because loss and death are the antitheses of birth, which

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predominates midwifery practice. There has been limited research on how student midwives are supported when caring for women with bereavement; however, poor support may have repercussions for future practice.

Aim:

The aim of this study is to explore the experiences of final-year student midwives when caring for women with perinatal loss.

Methods:

Two focus groups were conducted with 10 final-year BSc (Hons) Midwifery students. The focus groups lasted approximately 1 hour and used a semi-structured interview schedule. Data were analysed using thematic analysis.

Findings:

Four key themes were identified from the data: preparation for perinatal loss; 'just dealing with it'; contradiction and challenges with the role of the midwife; and emotional impact and coping strategies.

Conclusions:

Final-year student midwives believed they were ill-prepared in caring for women with perinatal loss, reported difficulties in communicating with women and believed they were excluded from their care. Students valued support from the bereavement midwife and identified effective strategies which helped them cope with bereavement and loss. (31 references) (Author)

Full URL: <http://www.magonlinelibrary.com/doi/full/10.12968/biom.2016.24.10.715>

20160927-31

Lost at sea. Merrick A (2016), *Midwives* vol 19, Autumn 2016, p 29

Student midwife Anna Merrick describes how her feelings have changed as she moves from the first to second year. (Author, edited)

20160927-30

When in doubt.... Martlew E (2016), *Midwives* vol 19, Autumn 2016, p 26

Student Emma Martlew on how she never felt 'the click' she expected. (Author)

20160926-33

Being a young midwifery student: a qualitative exploration. Einion A (2016), *The Practising Midwife* vol 19, no 8, September 2016, pp 33-35

This article examines the following study: Fenwick J, Cullen D, Gamle J et al. (2016). Being a young midwifery student: a qualitative exploration. *Midwifery* 39:27-34.

Research unwrapped is a popular series to help readers make sense of published research by undertaking a detailed appraisal of research articles in a careful and considered manner. In doing so we can advance our knowledge and understanding of a research topic and apply it to our practice. This process is designed to assess the usefulness of the evidence in terms of decision making an application to practice.


For many, entry into midwifery occurs directly or soon after leaving full time education, at a time when they first cross the threshold into adulthood. As it provides insight into the experience of being a student midwife, this article should be of relevance to anyone currently studying midwifery, and also to those who support such students, including mentors and midwifery educators. I chose a qualitative article because it enables us to gain an insight into the lived experiences of a student midwives and their perspective. (7 references) (Author, edited)

20160926-15


Should left-handed midwives and midwifery students conform to the 'norm' or practise intuitively?. Power A, Quilter J (2016), *British Journal of Midwifery* vol 24, no 9, September 2016, pp 656-659

Many tasks in midwifery are learned and taught from a right-handed perspective, meaning they may prove difficult for people who are left-handed. Experiences of midwives and midwifery students show that there are various barriers to learning and performing certain skills for left-handed people, and they are often forced to choose whether to persist

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in conforming to the 'norm' and using their right hand, or adapt elements of practice to suit left-hand dominance. (12 references) (Author)

20160916-10

Inspired by the midwives of Japan: a journey to expand the horizons of midwifery students - part 2. Shorten A (2016), Australian Midwifery News vol 16, no 1, Autumn 2016, pp 42-43

The second part of a reflection on a mentored student research experience to explore Japanese midwifery. Gives an overview of themes from the programme, including Japanese traditions around pregnancy and birth; midwifery presence and patience, with the prioritisation of non-pharmacological pain relief; the importance of freedom in choosing birth positions; nutrition in pregnancy and beyond; and sharing ideas for the future. (KRB)

20160708-26

Midwifery students experience of teamwork projects involving mark-related peer feedback. Hastie CR, Fahy KM, Parratt JA, et al (2016), Women and Birth: Journal of the Australian College of Midwives vol 29, no 3, June 2016, pp 252-259

Background

Lack of teamwork skills among health care professionals endangers patients and enables workplace bullying. Individual teamwork skills are increasingly being assessed in the undergraduate health courses but rarely defined, made explicit or taught. To remedy these deficiencies we introduced a longitudinal educational strategy across all three years of the Bachelor of Midwifery program.

Aim

To report on students' experiences of engaging in team based assignments which involved mark-related peer feedback.

Methods

Stories of midwifery students' experiences were collected from 17 participants across the three years of the degree. These were transcribed and analysed thematically and interpreted using feminist collaborative conversations.

Results

Most participants reported being in well-functioning teams and enjoyed the experience; they spoke of 'we' and said 'Everyone was on Board'. Students in poorly functioning teams spoke of 'I' and 'they'. These students complained about the poor performance of others but they didn't speak up because they 'didn't want to make waves' and they didn't have the skills to be able to confidently manage conflict. All participants agreed 'Peer-related marks cause mayhem'.

Conclusion

Teamwork skills should be specifically taught and assessed. These skills take time to develop. Students, therefore, should be engaged in a teamwork assignment in each semester of the entire program. Peer feedback should be moderated by the teacher and not directly related to marks. (50 references) (Author)

20160708-23

Young student's motivations to choose an undergraduate midwifery program. Cullen D, Sidebotham M, Gamble J, et al (2016), Women and Birth: Journal of the Australian College of Midwives vol 29, no 3, June 2016, pp 234-239

Background

Within the context of an ageing health workforce it is important to gain a greater understanding of the motivations of young people (aged less than 21 years) to choose a career in midwifery.

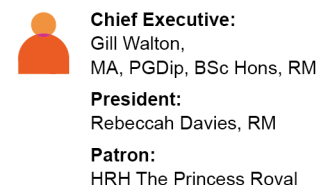
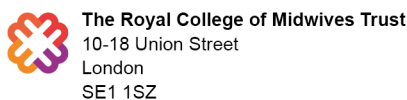
Aim

To explore the reasons why young students decided to study midwifery and enrol in one Australian Bachelor of Midwifery program.

Method

A descriptive exploratory qualitative design was used. Eleven midwifery students aged less than 21 years on enrollment participated in a semi-structured tape-recorded interview. The transcribed interviews were analysed using thematic analysis.

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Findings

Direct and indirect exposure to positive constructions of childbirth as well as the midwives role fuelled young student's fascination with midwifery and drove their desire to enrol. While some young students entered midwifery studies as a result of their 'love of babies' others took a more pragmatic 'wait and see' approach about their career choice. Many young students however clearly distinguished midwifery from nursing demonstrating an intention to be a midwife rather than a nurse. This decision often took place within the context of opposition from within their family, school and social networks where the public discourse continued to reinforce nursing as the preferred pathway to midwifery.

Conclusion

Creating opportunities for young people to be exposed to positive constructions of childbirth as well as midwifery role models may increase the number of young students entering midwifery. There is also a need for information to be provided to school careers officers to assist them to understand the distinction between midwifery and nursing. (34 references) (Author)

20160606-8

Resilience, midwifery and professional identity: changing the script of midwifery culture through narrative Part 1.

Einion A (2016), The Practising Midwife vol 19, no 6, June 2016, pp 30-32

Midwives can and should create their own culture through self-development, which fosters both positivity and resilience. One means of cultural and identity re-construction is through developing a critical and conscious awareness of the stories that we tell ourselves, each other and others, understanding how we co-create our identities through interactive narrative sharing. A small, narrative study of student midwives' learning journals shows a number of themes appearing. Characterisation of self and of clients raises questions about midwifery practice and resilience and how to change midwifery culture for the better. (9 references) (Author)

20160603-15

Hang on to your vision. Hagan K (2016), Midwives vol 19, Summer 2016, p 30

Student Karen Hagan on keeping going when you think you've lost your way. (Author)

20160506-53

'We are caught in a classic stand-off over bursaries'. Carter P (2016), Nursing Times vol 112, no 16, 20-26 April 2016, p 7

Comments that the way in which the government has announced plans to stop bursaries for student nurses and midwives has led to misinformation and hostility. (MB)

20160429-32

Being a young midwifery student: a qualitative exploration. Fenwick J, Cullen D, Gamble J, et al (2016), Midwifery vol 39, August 2016, pp 27-34

Background:

undergraduate midwifery programmes offer opportunities for school leavers and young people (aged less than 21 years) to enter the profession. There is limited research exploring this age groups experience of their Bachelor of Midwifery programme. In order to retain these students we need to ensure that their experiences of undertaking a Bachelor of Midwifery program are positive and barriers and challenges are minimised.

Aim:

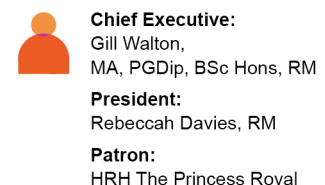
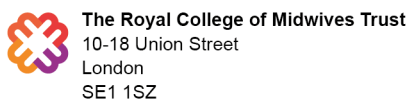
this study explored young midwifery students' experience of their Bachelor of Midwifery program.

Method:

a descriptive exploratory qualitative approach was used to explore the experiences of eleven students aged 20 years or less on enrolment. Data was collected using face-to-face or telephone-recorded interviews. Thematic analysis was used to analysis the data set.

Findings:

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three major themes described the young students' experiences. The first labelled 'The challenges of being young' presented a number of age related challenges including transport issues with on-call commitments as some students had not gained a driver's license. Students experienced some degree of prejudice relating to their age from their older student peers and some clinical staff during placements. 'Finding your way' was the second theme and described the strategies students used to build confidence and competence both in the university and clinical environment. The young students reported a strong commitment to the profession. They demonstrated high levels of connection with women and found the continuity of care experiences invaluable to their learning. The final theme 'Making the transition from teenager to midwife' demonstrated some unique insights into how studying to become a midwife impacted upon their personal and professional growth.

Conclusion:

the young students in this study encountered some unique issues related to their age. However as they progressed through the program they developed confidence in themselves and visualised themselves as having a long midwifery career. They were strongly motivated towards providing woman-centred maternity care and considered their continuity of care experiences fundamental to them developing a strong sense of themselves as midwives. Attracting and retaining young students is essential if the profession is to realise its goal of ensuring all women have access to a known midwife. (44 references) (Author)

20160425-25

An evaluation of direct-entry student midwives' perceptions of normal birth. Anderson G (2015), Evidence Based Midwifery vol 13, no 2, June 2015, pp 66-70

Background. 'Normal birth' as a term is used widely within midwifery and obstetric practice, in addition to midwifery education programmes. It is also a term which is complex, subjective and culturally experienced. Objective. This evaluation aimed to explore the perception of 'normal birth' as experienced by final-year direct-entry student midwives with a purpose of informing curriculum planning. Design. An explorative evaluation using a qualitative approach to gather student midwives' experiences of normal birth within the clinical setting. Data were collected via routine evaluation questionnaires and an online discussion forum; in addition, two tape-recorded focus group interviews were held and analysed using thematic content analysis. The use of routine curriculum evaluation procedures obviated the requirement for formal ethical approval, but on the advice of the School research ethics committee, voluntary written informed consent was requested from all potential participants, who were assured of confidentiality and that non-participation would have no deleterious consequences. Participants. All final-year student midwives (n=35) were invited to complete routine evaluation questionnaires and participate within the online discussion forum and 14 student midwives participated in the focus group interviews. Findings. The students identified a number of barriers perceived to hinder the promotion of normality in clinical practice. These perceived barriers included a lack of consensus on a definition of normal birth; medicalisation of childbirth; the influence of midwives and policies or protocols leading to defensive practice. The interactive themes of environment, education and empowerment emerged as necessary components to promote normality in childbirth. Implications. There is a need to move beyond the debate of what normal birth is and gain an acceptable universal definition on which midwifery and obstetric practice can be measured. (44 references) (Author)

20160415-39

Journey to midwifery. Stone H (2016), British Journal of Midwifery vol 24, no 4, April 2016, p 302

Heidi Stone, who won the Student of the Year award at this year's BJM Awards, shares the experiences that led her to give up her career in banking and become a midwife. (1 reference) (Author)

20160408-13

We are vulnerable, too. Anon (2016), The Practising Midwife vol 19, no 4, April 2016, pp 26-28

My transition to becoming a student midwife has not been straightforward: I bring baggage. I was raped 11 years ago

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and buried it, so did not consider that becoming a midwife would pose any problems. Little did I know that this journey would make me question my own experiences of pregnancy and motherhood, and would bring the rape and subsequent termination to the forefront of my mind, forcing me to confront issues that I would have preferred to leave unearthed. Reading around the subject has helped me to understand emotions that have surfaced, and put a name to how I am feeling, yet certain procedures in practice make me uncomfortable. It is thought that 20 per cent of women aged 16-59 have experienced a sexual assault of some type since turning 16 (Rape Crisis 2015), so being sensitive to vulnerabilities faced by service users, students and colleagues is crucial. I do not make recommendations for practice, but the reference list provides a starting point for those who wish to read more extensively. (7 references) (Author)

20160318-32

Passport to practice. Phillips S, Inkster H (2016), *Midwives* vol 19, Spring 2016, p 61

Reports on the Passport to Practice programme, which has been introduced at the Royal Berkshire NHS Foundation Trust in Reading to support student midwives in their transition to autonomous practitioners. (SB)

20160318-29

Made of money?. Roberts C (2016), *Midwives* vol 19, Spring 2016, pp 51-55

Discusses government plans to cut bursaries and introduce loans and tuition fees for midwifery, nursing and healthcare degrees. Considers the impact of these proposals on midwifery students and the profession and the outlines the concerns of universities and the RCM. (SB)

20160318-27

Standing out from the crowd. Tumini E (2016), *Midwives* vol 19, Spring 2016, p 31

The author discusses the benefits of non-midwifery learning opportunities and encourages all student midwives to broaden their horizons in order to gain valuable experiences. (SB)

20160318-26

The blue door. Yates A (2016), *Midwives* vol 19, Spring 2016, p 30

Recounts the author's experience of an elective placement at the Royal College of Midwives (RCM). (SB)

20160318-25

Compassionate care. Parker S (2016), *Midwives* vol 19, Spring 2016, p 28

Reflects on the importance of compassion in midwifery care. Describes how the author's experience of compassionate care during the birth of her daughter has made her determined to provide compassionate care as she embarks on her midwifery degree. (SB)

20160315-8

Don't tell me I can't change the world. Sporek PE (2016), *British Journal of Midwifery* vol 24, no 3, March 2016, p 226

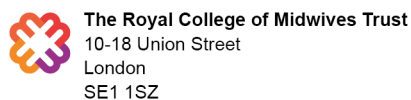
Paulina Sporek reflects on how her life has changed since starting her midwifery studies. (2 references) (Author)

20160308-38

'Abolishing bursaries will harm our NHS, staff and patients'. Bennett N (2016), *Nursing Times* vol 112, no 9, 2-8 March 2016, p 7

Comments that the abolition of student bursaries for nursing, midwifery and allied health professions will leave graduates more than £60,000 in debt. (MB)

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20160223-16*

A case study exploring the experience of graduate entry nursing students when learning in practice. Stacey G, Pollock K, Crawford P (2015), *Journal of Advanced Nursing* vol 71, no 8, July 2015, pp 2084-2095

To explore how Graduate Entry Nursing students present and position themselves in practice in response to anti-intellectualist stereotypes and assessment structures.

Background

A complex background turbulence exists in nurse education which incorporates both pro- and anti-intellectualist positions. This represents a potentially challenging learning environment for students who are recruited onto pre-registration programmes designed to attract graduates into the nursing profession on the basis of the specific attributes they bring known as 'graduateness'.

Design

A longitudinal qualitative case study conducted over 2 years.

Methods

Data were collected from eight Graduate Entry Nursing students at 6 monthly points between 2009-2011 via diaries, clinical assessment documentation and interviews. Forty interviews took place over 2 years. Additionally, three focus groups involving 12 practice assessors were conducted at the end of the study period. Data were analysed through a social constructivist lens and compared with a set of suppositions informed by existing empirical and theoretical debates.

Findings

Demonstrated the interplay of performance strategies adopted by Graduate Entry Nursing students to challenge or pre-empt actual or perceived negative stereotypes held by established practitioners to gain acceptance, reduce threat and be judged as appropriately competent.

Conclusion

Students interpreted and responded to, perceived stereotypes of nursing practice they encountered in ways which facilitated the most advantageous outcome for themselves as individuals. The data present the creative and self-affirming strategies which students adopted in response to the expectations generated by these stereotypes. They also depict how such strategies commonly involved suppression of the attributes associated with 'graduateness'. (54 references) (Author) [The full text of this article can be viewed free of charge at:

<http://onlinelibrary.wiley.com/doi/10.1111/jan.12673/full>]

20160223-15*

Are we failing to prepare nursing and midwifery students to deal with domestic abuse? Findings from a qualitative study. Bradbury-Jones C, Broadhurst K (2015), *Journal of Advanced Nursing* vol 71, no 8, July 2015, pp 2062-2072

Aims

To investigate student nurses' and midwives' knowledge, confidence and educational needs regarding recognition and responses to domestic abuse.

Background

Domestic abuse is a serious global problem and has greater, negative effects on long-term health than more obvious diseases, such as diabetes. Nurses and midwives are well-placed to recognize and respond to domestic abuse but many lack confidence in this area. There is firm evidence that training can increase the confidence of Registered Nurses and midwives in responding to domestic abuse. But the issue of undergraduate preparation is significantly under-investigated.

Design

A qualitative study.

Methods

Nursing and midwifery students were recruited using purposive sampling. We facilitated eight focus groups with a total of 55 students (student midwives N = 32; student nurses n = 23). Data were collected between May-November 2014.

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Findings

Students in the study viewed the issue of domestic abuse as important and they possessed sound theoretical knowledge of its nature and consequences. However, they lacked confidence in recognizing and responding to abuse and were concerned about the implications of this for their future practice as registered practitioners. Interactive learning opportunities that engaged with service users and involved experts from practice were viewed as important educational requirements.

Conclusion

Most students in the study felt insufficiently prepared to deal with the issue of domestic abuse. They perceived this as a cyclical state of disempowerment that would impact negatively on their practice and on their own ability to support nursing and midwifery students of the future. (33 references) (Author) [The full text of this article can be viewed free of charge at: <http://onlinelibrary.wiley.com/doi/10.1111/jan.12666/full>]

20160126-33

Evaluating postgraduate midwifery students' experiences of a model of blended learning. Geraghty S, Godwin H (2016), British Journal of Midwifery vol 24, no 1, January 2016, pp 60-63

This paper describes an evaluation of postgraduate midwifery students' experiences of a model of blended learning, following completion of a newly accredited Master of Midwifery Practice (MMP) course in a Western Australian university. Successful completion of the course leads to registration as a midwife with a Master's degree. This is the first midwifery degree at Master's level offered in Western Australia, which offers another route into the midwifery profession alongside existing options for postgraduate and undergraduate students. Midwifery students enrolled on the 2-year MMP course are registered nurses, who are offered flexible learning options involving on-campus and online learning, as opposed to traditional on-campus lectures and tutorials. The evaluation consisted of a 10-part questionnaire given to 25 midwifery students, of which 17 were completed and returned. Responses were analysed by the authors and a consensus on the final interpretation was reached. Four main themes were identified from the evaluation: variety of teaching methods, feeling overwhelmed, contextualising midwifery, and support. (10 references) (Author)

20160106-34*

Evaluation of the learning components of a blended Bachelor of Midwifery programme: student perceptions of how these contributed to their learning and their readiness for practice. Patterson J, Baddock S, Pairman S, et al (2015), New Zealand College of Midwives Journal no 51, December 2015, pp 50-58

Background: New information technologies for communication and distance learning enable programmes of study to be delivered, wholly or partly, off campus increasing the choice and flexibility for students. In 2007, Otago Polytechnic (OP) and Christchurch Polytechnic Institution of Technology (CPIT) Schools of Midwifery began a collaborative curriculum development for a jointly owned Bachelor of Midwifery, using a blended learning model for students based in seven regional sites throughout the South Island of New Zealand.

Aim: The aim of this survey was to evaluate the effectiveness of this new model of curriculum design and students' perceptions of their readiness for practice.

Method: A non-experimental descriptive survey of a purposive sample was developed to capture student demographics, their experiences of the blended learning components, and their perceptions of their readiness for practice. Graduands in 2011, 2012 and 2013 were invited to complete the survey. Ethical approval was obtained from the Otago Polytechnic Ethics Committee following consultation with the Kaitohutohu (Māori Advisor).

Findings: A response rate of 93% (14/15) students was achieved in 2011 for a paper survey and 47% (16/34) in 2012 and 50% (20/40) in 2013 with an online survey. Overall, the students agreed or strongly agreed that the weekly face-to-face tutorials, intensive block courses, online learning modules and online tutorials had all contributed positively to their learning, while some disagreed or strongly disagreed that aspects of their ākongā (tutorial) group process, the number of peer group presentations in intensives, and the level of oversight for their practice portfolio facilitated their learning. Almost all (12/13 in 2011, 14/14 in 2012; 11/12 in 2013) participants agreed or strongly agreed about the value of clinical placements and perceived themselves well prepared for midwifery practice.

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Conclusion: This survey was successful in identifying components of the blended delivery programme that students perceived enhanced their learning, and aspects of these that could be improved. Almost all who participated agreed that the programme had prepared them for beginning practice as a midwife. [Full article available online at: <https://www.midwife.org.nz/resources-events/nzcom-journal/issue-51/evaluation-of-the-learning-components-of-a-blended-bachelor-of-midwifery-programme/>] (42 references) (Author)

20151216-84

A day on the farm. Hooks C, Galloway F (2015), *Midwives* vol 18, Winter 2015, pp 48-49

Describes an initiative developed by Anglia Ruskin University for their third-year student midwives, which involves spending a day on a farm observing sheep give birth naturally. The initiative aims to encourage reflection on natural birth and for students to consider the similarities with human childbirth. (SB)

20151215-20

Welcome to practice: a guide for the first labour ward placement. Power A (2015), *British Journal of Midwifery* vol 23, no 12, December 2015, pp 902-903

Depending on the structure of their curriculum, some first-year midwifery students will already be preparing for their first clinical placements. Each clinical area has its particular demands; however, for many, it is the labour ward that causes the most trepidation as it is a dynamic and unpredictable environment. Theoretical training in the first year focuses on normal birth, but things do not always go to plan and sometimes student midwives are involved in obstetric emergencies that demand prompt, effective management. This guide provides basic information on two common obstetric emergencies: shoulder dystocia and postpartum haemorrhage. (7 references) (Author)

20151113-47

Values-based recruitment and the NHS constitution: making sure student midwives meet the brief. Power A, Clews C (2015), *British Journal of Midwifery* vol 23, no 11, November 2015, pp 818-820

Since publication of the findings from the Mid Staffordshire NHS Foundation Trust Public Inquiry (Francis, 2013), which identified levels of substandard care and failings from staff in exhibiting core values such as care and compassion, it became evident that improvements in levels of care were needed. In response, Health Education England (2014) published its national values-based recruitment (VBR) framework to encourage higher education institutions to complement their existing recruitment processes with VBR, to ensure applicants to undergraduate health-care programmes, such as midwifery, demonstrate values aligning with the principles of the NHS Constitution (Department of Health, 2015). This article will discuss how the University of Northampton piloted the integration of the VBR framework into its interview process through adopting a multiple mini interview approach. (12 references) (Author)

20151111-43

Compassion for others, self-compassion, quality of life and mental well-being measures and their association with compassion fatigue and burnout in student midwives: A quantitative survey. Beaumont E, Durkin M, Hollins Martin CJ, et al (2016), *Midwifery* vol 34, March 2016, pp 239-44

Background

Compassion fatigue and burnout can impact on the performance of midwives, with this quantitative paper exploring the relationship between self-compassion, compassion fatigue, self-judgement, self-kindness, compassion, professional quality of life and well-being of student midwives.


Method

A quantitative survey measured relationships between self-compassion, compassion fatigue, well-being, and burnout using questionnaires: (1) Professional Quality of Life Scale; (2) Self-Compassion Scale; (3) Short Warwick and Edinburgh Mental Well-being Scale; (4) Compassion For Others Scale.


Participants

A purposive and convenience sample of student midwives (n=103) studying at university participated in the study.

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Results

Just over half of the sample reported above average scores for burnout. The results indicate that student midwives who report higher scores on the self-judgement sub-scale are less compassionate towards both themselves and others, have reduced well-being, and report greater burnout and compassion fatigue. Student midwives who report high on measures of self-compassion and well-being report less compassion fatigue and burnout.

Conclusion

Student midwives may find benefit from 'being kinder to self' in times of suffering, which could potentially help them to prepare for the emotional demands of practice and study.

Implications

Developing, creating and cultivating environments that foster compassionate care for self and others may play a significant role in helping midwives cope with the stressors during their degree programme. (76 references) (Author)

20151111-12

Establishing a student-led midwifery society. Sinclair R, Fifer C (2015), Australian Midwifery News vol 15, no 3, Spring 2015, pp 19-20

Presents the professional and personal experiences of two student midwives on how they formed the Australian Catholic University Midwifery Society (ACU Mid Soc) with the aim of bringing together other students and helping them meet the challenge of combining study with family and social commitments. (JSM)

20151106-21

Wavering enthusiasm. Oram A (2015), The Practising Midwife vol 18, no 10, November 2015, pp 52-53

This reflection focuses on an experience I had whilst on my community placement involving my first birth, a home birth. I attended as a student midwife. In order to maintain confidentiality I have used pseudonyms throughout. I have mulled over my feelings about the first birth I witnessed, and midwifery as my future career and, most importantly, the role of the midwife at a home birth. (2 references) (Author)

20151104-10

Welcome to class: a survival guide for commencing student midwives. Power A (2015), British Journal of Midwifery vol 23, no 10, October 2015, pp 746-748

October is a very busy month in the university calendar as, along with 104 other higher education institutions (HEIs) delivering approved midwifery courses (Nursing and Midwifery Council, 2015a), we welcome our new cohort of students as they begin their journey to becoming a midwife and having the privilege of being 'with woman'. This article aims to provide commencing student midwives with some tips and information to help navigate the early stages of their course and ease the transition into a professional programme of study. Information is provided from the author's perspective as a senior lecturer with experience in teaching and supporting first-year students, combined with the reflections of three students who have recently completed the first year of their programme of study. The students share their thoughts on how they felt at the start of their programme and give suggestions for how to cope with its academic and clinical demands. (11 references) (Author)

20151028-60

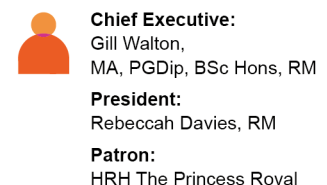
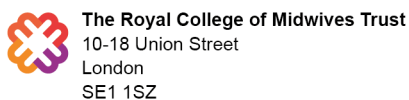
I can be a midwife! Haddrell S (2015), The Practising Midwife vol 18, no 9, October 2015, pp 41-42

The author reflects on a situation in which she gave advice to a pregnant woman who approached her during an antenatal class she was observing as a final year midwifery student. This positive experience gave her confidence in her ability to be a good midwife. (3 references) (SB)

20151028-40

Midwives making a difference: a conference organised by and for student midwives. Lake J, Butt C, Way S (2015), The

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The midwifery council at Bournemouth University, each year, is set the objective to organise and deliver a conference for student midwives. It is a very lengthy task that requires a lot of dedication from the students who make up the council; they work tirelessly to arrange speakers for the day. Previous speakers at the conferences have included Michel Odent, Milli Hill and representatives from charities. Although time consuming, the day is highly valued by the students and it equips each council member with organisational, public-speaking and time-management skills that are essential for midwifery practice today. (Author)

20151028-15

Using Rasch analysis to identify midwifery students' learning about providing breastfeeding support. Blackman I, Sweet L, Byrne J (2015), *Women and Birth: Journal of the Australian College of Midwives* vol 28, no 3, September 2015, pp 228-235

AIM:

To report on a study measuring midwifery students' self-reported abilities in teaching and supervising breastfeeding mothers. Abilities were assessed at two time intervals, before and after completing a maternal and infant nutrition topic with simultaneous clinical opportunities to consolidate their skills.

METHOD:

A convenience sample of midwifery students in an Australian university completed a pre- and post-intervention survey to assess their self-rated ability to teach and supervise breastfeeding mothers. Rasch analysis was used to gain conjoint estimates of students' self-reported abilities to teach and supervise breastfeeding mothers across 37 items with varying complexity of care needs. Rasch analysis was used to determine validity and reliability of the 37-item tool, to develop a hierarchical linear scale reflecting difficulty of breastfeeding supportive activities, and to determine student learning between the two time points.

RESULTS:

From 95 responses, 34 of the 37 items met the requirement for unidimensionality. Outcomes identified that midwifery students' self-efficacy measures for breastfeeding support abilities can be reliably estimated. A hierarchical scale for learning these clinical skills has been generated to inform curricula development and learning processes. While there was an overall increase in the ease of difficulty of 21 items in the survey at time point two, eight items were identified as becoming more difficult.

CONCLUSION:

The findings of this study challenge midwifery educators to reconsider the educational activities provided for midwifery students' that aim to develop the requisite skills to provide effective breastfeeding support, including the provision of specific clinical opportunities to learn from breastfeeding women. (42 references) (Author)

20151007-48

One-to-one care. Stacey L (2015), *Association for Improvements in Maternity Services (AIMS)* vol 27, no 3, 2015, pp 20-21

The author shares her experiences of providing supportive care while still a student, in a case-loading midwifery practice, to a young woman with a multiple pregnancy (monochorionic twins and singleton) whose twins had died at 18 weeks' gestation but whose daughter was born by caesarean section. Describes how she met the different needs of the mother, who had decided to see her twins the day after the birth of the surviving singleton, and the father who had decided not to see his babies, but to remember them from their scan images. (9 references) (JSM)

20150925-6

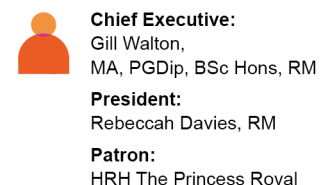
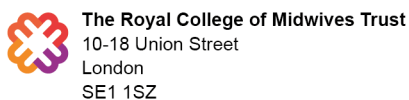
A way of life. Merrick A (2015), *Midwives* vol 18, Autumn 2015, p 22

Letter from a 19 year-old first year student midwife who shares her thoughts on embarking on a career she felt she was always destined for. (MB)

20150924-22

The student and the phoenix - transformation in action. Peel N (2015), *Midwifery Matters* no 146, Autumn 2015, pp 6-7

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The author likens her experience of training to be a midwife in her early forties to a phoenix rising from the ashes.
(MB)

20150805-32

Commencing Undergraduate Midwifery Students' Beliefs About Birth and the Role of the Midwife. Bass J, Sidebotham M, Gamble J, et al (2015), International Journal of Childbirth vol 5, no 2, 2015, pp 83-90

BACKGROUND: A shift has occurred in the last decade toward preregistration undergraduate Bachelor of Midwifery programs in Australia. This has led to an increase in the numbers of student midwives from diverse backgrounds with limited experience of university and socialization into hospital systems.

AIM: This study aimed to explore commencing midwifery students' beliefs about birth and expectations of the role of the midwife.

METHOD: A qualitative descriptive approach was used. All 115 commencing first-year midwifery students enrolled in the first week of an undergraduate Bachelor of Midwifery program were invited and completed a self-administered survey. The survey used open-ended questions to elicit student beliefs about birth and the role of the midwife. Latent content analysis was used to analyze the data set.

FINDINGS: Midwifery students' beliefs were captured within the four themes: birth as 'a miracle,' 'a woman's journey,' 'a transformative event,' and 'a natural process.' Students articulated the role of the midwife as one of support, education, advocacy, and partnership. Student beliefs and expectations were aligned with the emergent philosophy of the normality of birth and woman-centered care within the Australian maternity care context.

CONCLUSION: Greater understanding is essential to designing quality midwifery education programs that are responsive to the needs of commencing student midwives. Supporting midwifery students' successful transition into, and early engagement with the midwifery profession, may have long-term benefits in terms of retention and successful completion of their program. In addition, ensuring professional socialization occurs early is likely to develop graduates who are well prepared to work across their full scope and are willing to participate in the reform of maternity services in Australia. (Author)

20150804-44

'Normality' in 2015. Anon (2015), Midwives vol 18, Spring 2015, p 28

A student midwife shares her experiences of witnessing and assisting in fewer 'normal' births than caesarean sections or instrumental deliveries in her two years of training. She explains the concerns she has and the changes she would like to see to midwifery education and how she would like the Royal College of Midwives (RCM) to support a new campaign to encourage the next generation of midwives to experience a greater number of physiological births. (JSM)

20150720-14

The problems with comparisons. Brown N (2015), Midwives vol 19, Summer 2015, p 28


Examines how comparisons with others can be discouraging. Advises that while it is important to share experiences it is also important to know the difference between conversations that lead to negative comparisons and those that are helpful. (SB)

20150707-18


Student observations of care in the NICU. Tant M (2015), Essentially MIDIRS vol 6, no 3, April 2015, pp 36-38

Student midwife, Michelle Tant, shares her experiences of a placement on a neonatal intensive care unit, which gave her the opportunity to support women to breastfeed their premature or sick infant, (4 references) (JSM)

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20150706-44

SMF update. Linay D (2015), *Midwives* vol 17, no 6, 2014, p 54

Describes the work and processes of the Royal College of Midwives' (RCM) Student Midwives Forum. (JSM)

20150706-15

Making education work for you. Thomas A (2014), *Midwives* vol 17, no 6, 2014, p 31

Explains how the author, a student midwife in her third year of a midwifery degree, has taken an independent approach to learning, and how this has helped shape her education and is preparing her for a role in midwifery. (JSM)

20150706-14

MSW to student midwife. Murphy B (2015), *Midwives* vol 17, no 6, 2014, p 29

Describes how the author drew on her experiences of working as a healthcare assistant in gynaecology, and then as a maternity support worker, to achieve her ambition of gaining a place at university to study midwifery. (JSM)

20150615-20

The benefits of dyslexia. Jones J (2014), *Midwives* vol 17, no 5, 2014, p 31

Jude Jones, a third-year student midwife with dyslexia, explains how receiving a diagnosis of the condition in her first year helped her to adapt her learning strategy and improve her learning experience. (JSM)

20150513-15

'No man's land': An exploration of the traumatic experiences of student midwives in practice. Davies S, Coldridge L (2015), *Midwifery* vol 31, no 9, September 2015, pp 858-864

Background

The role of being 'with woman' during traumatic birth has been identified as having an emotional cost for midwives, but to date no research has explored traumatic experiences of student midwives.

Aim

To explore student midwives' perceptions of what was traumatic for them and how they were supported with such events.

Design

A qualitative descriptive approach, using semi structured interviews.

Setting

One university in the North West of England.

Participants

11 student midwives recruited by poster campaign.

Findings

Five main themes emerged from the analysis. Wearing your Blues depicted what participants described as the 'bleak' landscape of practice. No Man's Land was concerned with traumatic tensions in the student role. 'Get the Red Box!' and The Aftermath concerned traumatic events in practice and the impact of these on students. Learning to cope related to the way students coped with such incidents, as well as other stresses in the role.

Key conclusions

The student midwife inhabits a vulnerable position in the 'no man's land' of hospital practice. Her (1)

1. In this paper we refer to the student midwife as female, because all the participants were women.

strong identification with the woman renders her potentially more vulnerable in traumatic situations. The study revealed a paradigmatic clash between the manualised care of a busy obstetric unit and the individualised woman-led approach they were expecting.

Implications for practice

It seems important for the profession to recognise that distressing events are not always the obvious critical incidents

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in care, and that a culture of support and/or debriefing after adverse events may assist students to articulate their needs and develop resilience. Educators may need to appreciate that the student midwife role in an emergency may heighten her vulnerability.

This study also highlighted the potential alienation of students when placed in the maelstrom of a busy obstetric unit. The Birthplace study (Brocklehurst et al., 2011), NHS England's Five Year Forward View (NHS England, 2014) and NICE (2014) all recommend increasing the numbers of out-of-hospital births: it seems likely that such a reorganisation of care would improve the experiences of mothers and those who care for them during birth. As part of a 'design for compassionate care' (Crawford et al., 2014) it is important to foster spaces, processes and resources which are compassionate to practitioners and students. (44 references) (Author)

20150429-48*

Evaluation of the pathways for students into health professions: the training of under-represented minority students to pursue maternal and child health professions. Guerrero AD, Holmes FJ, Inkelas M, et al (2015), Maternal and Child Health Journal vol 19, no 2, February 2015, pp 265-270

The Pathways for Students into Health Professions program is one of four nationally funded programs by the Maternal and Child Health Bureau of the US Department of Health and Human Services to support the training of undergraduate students, particularly from under-represented minority groups to pursue maternal and child health professions. To assess the program's impact on student ratings, knowledge, and interest in maternal and child health professions. A baseline survey on student ratings and knowledge in maternal and child health topics and careers, public health topics, and career development topics was provided to 32 students at the beginning of their first year in the program and approximately 1 year after participation. Half of the students (16 students) in the program from 2009-2011 were from traditionally underrepresented minority groups. After participation, students reported significantly higher ratings of interest in maternal and child health topics and careers and in receiving adequate academic and career guidance. Students also reported significantly higher knowledge of public health, childhood and maternal morbidity and mortality, health care disparities, and life course health development. The program's didactic, experiential, and mentorship activities are changing student ratings and knowledge in a favorable direction toward maternal and child health careers and topics. Undergraduate training programs may be an important mechanism to strengthen the pipeline of a diverse healthcare workforce. (14 references) (Author)

20150324-42

Empowering home birth - a student's perspective. Green T (2015), Midwifery Matters no 144, Spring 2015, pp 13-17

The author shares her experiences of meeting, getting to know and supporting a young woman whose birth she would attend at home. (JSM)

20150324-40

Letter to a young student midwife. Steinhauer S (2015), Midwifery Matters no 144, Spring 2015, pp 9-10

An open letter from the author, a newly qualified midwife, offering support, advice and encouragement to student midwives on how to survive midwifery training and make the most of any opportunities for learning and development that come their way. (JSM)

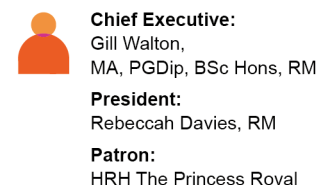
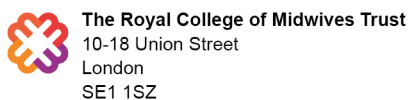
20150227-57*

The relationship between emotional intelligence, previous caring experience and mindfulness in student nurses and midwives: a cross sectional analysis. Snowden A, Stenhouse R, Young J, et al (2015), Nurse Education Today vol 35, no 1, 2015, pp 152-158

BACKGROUND:

Emotional Intelligence (EI), previous caring experience and mindfulness training may have a positive impact on nurse education. More evidence is needed to support the use of these variables in nurse recruitment and retention.

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OBJECTIVE:

To explore the relationship between EI, gender, age, programme of study, previous caring experience and mindfulness training.

DESIGN:

Cross sectional element of longitudinal study.

SETTING AND PARTICIPANTS:

938 year one nursing, midwifery and computing students at two Scottish Higher Education Institutes (HEIs) who entered their programme in September 2013.

DATA:

Participants completed a measure of 'trait' EI: Trait Emotional Intelligence Questionnaire Short Form (TEIQue-SF); and 'ability' EI: Schutte's et al. (1998) Emotional Intelligence Scale (SEIS). Demographics, previous caring experience and previous training in mindfulness were recorded.

METHODS:

Relationships between variables were tested using non-parametric tests.

RESULTS:

Emotional intelligence increased with age on both measures of EI [TEIQ-SF H(5)=15.157 p=0.001; SEIS H(5)=11.388, p=0.044]. Females (n=786) scored higher than males (n=149) on both measures [TEIQ-SF, U=44,931, z=-4.509, p<.001; SEIS, U=44,744, z=-5.563, p<.001]. Nursing students scored higher than computing students [TEIQ-SF H(5)=46,496, p<.001; SEIS H(5)=33.309, p<.001]. There were no statistically significant differences in TEIQ-SF scores between those who had previous mindfulness training (n=50) and those who had not (n=857) [U=22,980, z=0.864, p = 0.388]. However, median SEIS was statistically significantly different according to mindfulness training [U=25,115.5, z=2.05, p=.039]. Neither measure demonstrated statistically significant differences between those with (n=492) and without (n=479) previous caring experience, [TEIQ-SF, U=112, 102, z=0.938, p=.348; SEIS, U=115,194.5, z=1.863, p=0.063].

CONCLUSIONS:

Previous caring experience was not associated with higher emotional intelligence. Mindfulness training was associated with higher 'ability' emotional intelligence. Implications for recruitment, retention and further research are explored. (Author)

20150107-44**Survey results of first and second year New Zealand midwifery students' level of engagement in a flexible delivery programme.** Milne T, Skinner J, Baird K (2014), New Zealand College of Midwives Journal no 50, December 2014, pp 5-10

Objective: This paper describes the survey results of first and second year New Zealand (NZ) midwifery students' level of engagement while being taught in face-to-face, videoconference (VC) and online activities as part of a fully flexible delivery curriculum. **Methods:** First and second year undergraduate midwifery students (n =104) from one New Zealand midwifery education provider were invited to participate and complete an online survey. Students were recruited from the main city campus learning hub and three smaller regional learning hubs (RLH). **Measurements:** The survey asked for: demographic information, skills, experience and confidence with modes of flexible learning, information technology, online student learning platforms, and engagement with learning. **Data were analysed using** descriptive statistics including minimum and maximum scores, means, ranges and weighted averages. **Results:** 52 % (n = 54) of students provided feedback. 40 % (n = 21) of respondents considered they had minimal experience with online learning platforms and 48 % (n = 49) indicated a lack of confidence to participate in learning sessions delivered via VC. 66 % (n = 67) of respondents rated their involvement in learning much higher in face-to-face sessions than with VC. Respondents felt more engaged with their peers from their own regional learning hub (RLH) and less with the teaching, clinical and administration teams.

Conclusion: Students need to be orientated and educated to use technology adequately for their learning. Although flexible modes of delivery in midwifery education enhance student access, the quality of learning requires reliable technology with good capacity, and pedagogy that fosters a high level of interaction. Rural and remote students rated engagement with face-to-face teaching highly. Support and continuing training and education for both faculty and students need to be offered to maximise the potential of flexible delivery modes. This was a small survey with students from one NZ midwifery education provider. Results need to be interpreted with this in mind. (25 references)

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20141125-101*

Midwifery students learning experiences in labor wards: A grounded theory. Brunstad A, Hjalmlhult E (2014), Nurse Education Today vol 34, no 12, 2014, pp 1474-1479

BACKGROUND:

The labor ward is an important and challenging learning area for midwifery students. It is there the students learn in authentic complex situations, in intimate situations, with potential risk for the life and health of mothers and their babies.

OBJECTIVE:

The aim of this study was to explore the main concern expressed by midwifery students in labor wards and how they handled this concern.

DESIGN:

A longitudinal study based on grounded theory methodology was used. The participants were 10 postgraduate midwifery students, from a University College in Norway. Data were gathered and analyzed throughout the 2-year postgraduate program, in the students first, third and fourth semesters. Every student was interviewed three times in a total of 15 single and three focus-group sessions.

FINDINGS:

The grounded theory of 'building relationships' explains how students dealt with their main concern: 'how to gain access to learning experiences'. This theory consisted of three strategies; a) controlling vulnerability, b) cultivating trust and c) obtaining acceptance.

CONCLUSION:

Clarifying discussions involving midwives and students may facilitate the process of building relationships and contribute to confident learning. Students appreciate it when the midwives initiate discussions about acute situations and state that a novice may perceive labor and childbirth as more frightening than an experienced midwife would.

(Author)

20141010-2

Using the five senses of success framework to understand the experiences of midwifery students enrolled in an undergraduate degree program. Sidebotham M, Fenwick J, Carter A, et al (2015), Midwifery vol 31, no 1, January 2015, pp 201-207

Background: developing a student's sense of capability, purpose, resourcefulness, identity and connectedness (five-senses of success) are key factors that may be important in predicting student satisfaction and progression within their university program. Aim: the study aimed to examine the expectations and experiences of second and third year midwifery students enrolled in a Bachelor of Midwifery program and identify barriers and enablers to success.

Method: a descriptive exploratory qualitative design was used. Fifty-six students enrolled in either year 2 or 3 of the Bachelor of Midwifery program in SE Queensland participated in an anonymous survey using open-ended questions. In addition, 16 students participated in two year-level focus groups. Template analysis, using the Five Senses Framework, was used to analyse the data set. Findings: early exposure to 'hands on' clinical midwifery practice as well as continuity of care experiences provided students with an opportunity to link theory to practice and increased their perception of capability as they transitioned through the program. Student's sense of identity, purpose, resourcefulness, and capability was strongly influenced by the programs embedded meta-values, including a 'woman centred' approach. In addition, a student's ability to form strong positive relationships with women, peers, lecturers and supportive clinicians was central to developing connections and ultimately a sense of success. A sense of connection not only fostered an ongoing belief that challenges could be overcome but that students' themselves could initiate or influence change. Conclusions: the five senses framework provided a useful lens through which to analyse the student experience. Key factors to student satisfaction and retention within a Bachelor of Midwifery program include: a clearly articulated midwifery philosophy, strategies to promote student connectedness including

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the use of social media, and further development of clinician's skills in preceptorship, clinical teaching and facilitation. Program delivery methods and student support systems should be designed to enable maximum flexibility to promote capability and resourcefulness and embed sense of purpose and identity early in the program.

(Author)

20140910-7

Witnessing the art of woman-centred care by an exceptional mentor. Lake J (2014), The Practising Midwife vol 17, no 8, September 2014, pp 24-26

Using Gibb's (1998) reflective cycle, I have reflected on an experience I had as a first year student midwife working in the community setting. I met Hannah (name changed in accordance with the Nursing and Midwifery Council (NMC) (2008) guidelines relating to confidentiality) on several occasions and found that she had a great relationship with my midwife-mentor, despite her wishes falling outside of trust guidance and her feeling pressurised, by some, not to have a home birth. I analysed the relationship between Hannah and my midwife-mentor using three pairs of concepts that Lundgren and Berg (2007) considered to be essential for building sustainable, mutually-productive relationships between women and midwives: differenceness - support uniqueness; trust - mediation of trust; and participation - mutuality. I concluded that mimicking and adopting many of my mentor's characteristics, as shown in her relationship with Hannah, would benefit me and the women in my care. (18 references) (Author)

20140910-6

Examining compassion and resilience through various lenses. Nolan M (2014), The Practising Midwife vol 17, no 8, September 2014, pp 20-23

In the aftermath of the Mid-Staffs Enquiry, as part of our midwifery students' enquiry-based learning curriculum, a session was devised with the aim of enabling the students to harness the energy for change of the Francis report (Francis 2013) to explore their understanding and experience of compassion. In this article, Mary Nolan describes the structure of the sessions, and three of the students give an account of the work they undertook in small groups to explore strategies for remaining resilient in the face of the inevitable challenges they will meet once qualified. While they were already keenly aware of threats to compassion in midwifery, they were optimistic that their passion for their chosen profession, and their increased understanding of factors promoting resilience, would be protective. (11 references) (Author)

20140910-4

Australian midwifery students and the continuity of care experience - getting it right. Sidebotham M (2014), The Practising Midwife vol 17, no 8, September 2014, pp 11-12, 14

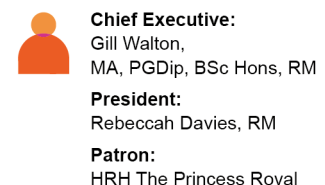
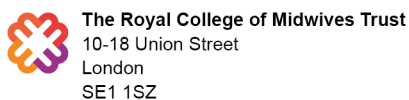
The evidence base supporting the value to be gained by women and babies from receiving continuity of care from a known midwife is growing; it is essential, therefore, that we nurture the future workforce to work within this model of care. The Australian National Midwifery Education Standards mandate that midwifery students provide continuity of care to 20 women as part of their practice requirements. The educational value to students and the degree of preparation this provides for future work patterns is well acknowledged. There is also growing evidence that women, too, benefit from having a student follow them through the pregnancy journey. This paper examines the experience of some students working within this model and comments on the importance of providing a flexible programme delivery model and supportive midwifery educators in order to sustain and develop this innovative approach to completing clinical practice requirements within a midwifery education programme. (7 references) (Author)

20140716-54

Final year students' learning experiences of the Bachelor of Midwifery course. Carolan-Olah M, Kruger G (2014), Midwifery vol 30, no 8, August 2014, pp 956-961

AIM:

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the aim of the study was to explore the concerns of 3rd year Bachelor of Midwifery students.

BACKGROUND:

earlier research indicates that midwifery students experience a number of conflicting learning demands and expectations, during their student years. These difficulties can lead to anxiety and a lack of confidence, which have implications for student integration and socialisation into the profession.

METHODS:

a qualitative method was used, underpinned by Smith and Osborn's (2008) approach to interpretative phenomenological analysis IPA. In-depth interviews were conducted among 10 senior midwifery students as they looked back over their three year course. Data were analysed using steps proposed by Smith and Osborn (2008).

KEY FINDINGS:

more than two-thirds of participants were over 35 years, and had two or more children. More than half were living with a spouse/partner and the majority worked 16 hours or less per week. Themes emerging from the data included (1) linking theory to practice; (2) a focus on clinical skills; (3) learning expectations and experiences; and (4) the role of midwifery lecturers/educators.

CONCLUSIONS AND IMPLICATIONS FOR PRACTICE:

midwifery students experience a number of challenges associated with their pre-registration midwifery education, including difficulty understanding the relevance of some study units to midwifery practice. A strong focus on practical skills may inhibit the development of cognitive skills such as critical evaluation and reflection. (26 references) (Author)

20140716-38

When inspiration strikes. Sardarizadeh S (2014), *Midwives* Vol 17, no 4, 2014, p 29

Sara Sardarizadeh shares her experience of an insightful study day and why it's important for students of all levels to make time for them. (Author)

20140701-76

Midwifery students' conceptions of worst imaginable pain. Martensson LB, Ek K, Ekstrom A, et al (2014), *Women and Birth: Journal of the Australian College of Midwives* vol 27, no 2, June 2014, pp 104-107

BACKGROUND:

The Visual Analogue Scale (VAS) is one of the most widely used pain assessment scales in clinical practice and research. However, the VAS is used less frequently in midwifery than in other clinical contexts. The issue of how people interpret the meaning of the VAS endpoints (i.e. no pain and worst imaginable pain) has been discussed. The aim of this study was to explore midwifery students' conceptions of 'worst imaginable pain'.

METHODS:

A sample of 230 midwifery students at seven universities in Sweden responded to an open-ended question: 'What is the worst imaginable pain for you?' This open-ended question is a part of a larger study. Their responses underwent manifest content analysis.

RESULTS:

Analysis of the midwifery students' responses to the open-ended question revealed five categories with 24 sub-categories. The categories were Overwhelming pain, Condition-related pain, Accidents, Inflicted pain and Psychological suffering.

CONCLUSIONS:

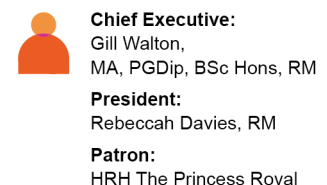
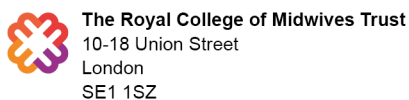
The midwifery students' conceptions of 'worst imaginable pain' are complex, elusive and diverse. (39 references) (Author)

20140527-34

Final year students' experiences of the Bachelor of Midwifery course. Carolan-Olah M, Kruger G, Walter R, et al (2014), *Midwifery* vol 30, no 5, May 2014, pp 519-525

Aim

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: the aim of the study was to explore the experiences of final year Bachelor of Midwifery students.

Background

: earlier research indicates that midwifery students experience a number of difficulties and concerns during their studentship. These difficulties can lead to a lack of confidence and poorer integration and socialisation into the profession. Ultimately, poorer integration may lead to dissatisfaction and attrition from the profession.

Methods

: a qualitative approach, informed by interpretative phenomenological analysis (IPA), was used in this study. Ten completing Bachelor of Midwifery students participated in in-depth interviews and reflected on their experiences over their three year course. Data were subjected to IPA analytic steps as proposed by Smith and Osborn (2008).

Key findings

: demographics revealed that participants were generally aged more than 35 years and worked 16 hours or less per week. Most had two or more children and lived with a spouse/partner. Four main themes emerged from the analysis: (1) a challenging start; (2) coming to terms with course requirements; (3) developing strategies; and (4) overall satisfaction with the course. Participants generally considered that their individual strengths and determination helped them to negotiate the many challenges they encountered during the course.

Conclusions and implications for practice

: this study indicates that students undergo a process of adjustment as they travel through the Bachelor of Midwifery course. The most critical transition phase appears to occur in the first year and students may require additional supports to assist their socialisation into both the university and their course. Particular needs identified include return to study skills for mature-aged students and counselling and support group needs generally. The provision of such supports may assist with the retention of students within the course and may contribute to overall student satisfaction. (48 references) (Author)

20140417-59

Midwifery students' evaluation of team-based academic assignments involving peer-marking. Parratt JA, Fahy KM, Hastie CR (2014), Women and Birth: Journal of the Australian College of Midwives vol 27, no 1, March 2014, pp 58-63

Background Midwives should be skilled team workers in maternity units and in group practices. Poor teamwork skills are a significant cause of adverse maternity care outcomes. Despite Australian and International regulatory requirements that all midwifery graduates are competent in teamwork, the systematic teaching and assessment of teamwork skills is lacking in higher education. **Question** How do midwifery students evaluate participation in team-based academic assignments, which include giving and receiving peer feedback? **Participants** First and third year Bachelor of Midwifery students who volunteered (24 of 56 students). **Methods**

Participatory Action Research with data collection via anonymous online surveys. **Key findings** There was general agreement that team based assignments; (i) should have peer-marking, (ii) help clarify what is meant by teamwork, (iii) develop communication skills, (iv) promote student-to-student learning. Third year students strongly agreed that teams: (i) are valuable preparation for teamwork in practice, (ii) help meet Australian midwifery competency 8, and (iii) were enjoyable. The majority of third year students agreed with statements that their teams were effectively coordinated and team members shared responsibility for work equally; first year students strongly disagreed with these statements. Students' qualitative comments substantiated and expanded on these findings. The majority of students valued teacher feedback on well-developed drafts of the team's assignment prior to marking. **Conclusion** Based on these findings we changed practice and created more clearly structured team-based assignments with specific marking criteria. We are developing supporting lessons to teach specific teamwork skills: together these resources are called 'TeamUP'. TeamUP should be implemented in all pre-registration Midwifery courses to foster students' teamwork skills and readiness for practice. (33 references) (Author)

20140319-89

Three pillars of support. Wallbank S (2014), Midwives vol 17, no 2, 2014, p 29

Studying to become a midwife can be a stressful and challenging experience Sarah Wallbank explains how getting the right support has been vital for her. (Author)

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20140310-82*

Students' and teachers' views of written feedback at undergraduate level: A literature review. Agius NM, Wilkinson A (2014), Nurse Education Today vol 34, no 4, 2014, pp 552-559

OBJECTIVES:

To explore undergraduate students' expectations and teachers' views of written feedback.

DESIGN:

Narrative literature review.

DATA SOURCES:

Seven electronic databases were searched for primary research published in English with additional manual searches and reference tracking.

REVIEW METHODS:

Systematic approach to search strategy, selection and appraisal of papers, data extraction and synthesis following Hawker et al.'s (2002) guidelines.

RESULTS:

21 studies met the inclusion criteria. Four student themes were identified concerning written feedback: quality, quantity and location of feedback, feed-forward and timeliness. Teachers reported that time pressures, institutional policies, and administrative issues affect feedback provision.

CONCLUSIONS:

Rigorous research is needed to gain a better understanding of students' expectations of written feedback. Strategies need to be adopted to meet students' expectations and educate students to take an active role and reflect on the feedback received. (Author)

20140217-48

Reflecting on practice. McCurrie J (2013), Australian Midwifery News vol 13, no 4, Summer 2013, pp 20-21

A student midwife uses Gibbs' model of reflection to evaluate the midwifery care that she provided to a woman following the birth of her baby. (CI)

20140217-46

Students in group practice. Tierney O (2013), Australian Midwifery News vol 13, no 4, Summer 2013, pp 12-15

Describes how the Midwifery Student Group Practice at Port Macquarie hospital in Australia has benefitted both women in the local community, by providing continuity and woman-centred care, and students, who have been able to experience working within a midwifery-led model, which has supported and enhanced their learning. (CI)

20140131-46

Cultural exploration. Thomas-Hamblin C (2014), Midwives vol 17, no 1, 2014, pp 28-29

Midwifery student Chelsea Thomas-Hamblin compares the maternity services in a busy hospital in the Philippines to those in the UK. (Author)

20131212-31*

Student and newly qualified midwives employment survey. Royal College of Midwives (2012), London: Royal College of Midwives November 2012. 20 pages

Presents the results of the second annual survey of student midwives and newly qualified midwives carried out by the Royal College of Midwives to investigate their experiences of finding a job. (CI)

Full URL: <http://www.rcm.org.uk/EasySiteWeb/GatewayLink.aspx?allid=314165>

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20131212-27*

Student and newly qualified midwives employment survey. Royal College of Midwives (2013), London: Royal College of Midwives November 2013. 21 pages

Presents the findings of the third annual survey of student midwives and newly qualified midwives conducted by the Royal College of Midwives which investigated their experiences of finding a job. The findings show that despite an estimated shortage of 4,784 midwives in the UK, newly qualified midwives continue to struggle to secure a post as a midwife. (CI)

20131111-7

Supporting student midwives through clinical incidences in practice: The Southampton Model. Kitson-Reynolds E, Ferns P (2013), British Journal of Midwifery vol 21, no 11, November 2013, pp 808-812

Student midwives are increasingly being asked to provide written statements concerning their involvement in clinical cases. This article presents the 'Southampton Model', which has the purpose of supporting student midwives through clinical incidences. An academic lead for student incidences in practice (midwifery) who is also a Supervisor of Midwives has been identified to support students through the often emotional and traumatic experience of being involved in a clinical incident and having to write a statement. Students receive a debriefing opportunity through reflection, by experiencing the investigation processes or part thereof while still a student. By experiencing proactive supervision and questioning during the fact-finding exercise, this acts as an educational tool for the student. The University of Southampton has further developed strong links with the local Trust to enhance the process for student learning and development, and to ensure that effective communication remains paramount with a view to minimising the practice-theory divide. (16 references) (Author)

20131107-40

Advancing to basics: a student midwife in Gambia. Elis C (2013), The Practising Midwife vol 16, no 10, November 2013, pp 16, 18-19

As a student midwife I wanted to experience the delivery of midwifery care in a setting that was completely different from what I was used to, and had the opportunity to join a team of 10 medical students on a two-week exchange visit to Gambia as part of the Swansea-Gambia link. I worked on the maternity unit at the Royal Victoria Teaching Hospital (RVTH) in the capital city, Banjul, the national referral centre for Gambia. The Swansea-Gambia link was formed from 'Wales for Africa Health links' - a unique response, from Wales, to the United Nations Millennium development Goals (United Nations Development Plan (UNDP) 2009). I am thrilled that my involvement with the link has now established the opportunity for two Swansea midwifery students to visit Gambia each year as an elective placement. (7 references) (Author)

20131030-11*

Eloise Amelia Kahn's birth story. Kahn KM (2013), The Journal of Perinatal Education vol 22, no 2, Spring 2013, pp 67-76

Eloise Amelia Kahn's birth story highlights my experience as a nursing student preparing to be a mother and how studying nursing during my pregnancy influenced my thought process during pregnancy and labor, my evolving relationship with my certified nurse-midwife, and my unmedicated childbirth in a hospital setting. (Author)

20131011-64

Student life. Linay D (2013), Midwives no 4, 2013, p 52

Changes to the RCM's Student Midwives Forum mean that the group has a wider remit than in the past. Denise Linay, who has taken over responsibility for the forum, explains more. (Author)

20131011-5

The long road to midwifery. Abel HR (2013), Midwives no 3, 2013, pp 26-27

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20131003-38

A midwife's journey with grief. Knott E (2013), British Journal of Midwifery vol 21, no 10, October 2013, p 758

A student midwife reflects on her experiencing a baby loss support group. (4 references) (CI)

20130919-43*

Final year students' perceptions of learning to be a midwife in six British universities. McIntosh T, Fraser DM, Stephen N, et al (2013), Nurse Education Today vol 33, no 10, 2013, pp 1179-1183

Midwifery education in the UK has been delivered through the University sector since the mid-1990s, with the requirement to create safe, effective clinicians who are equipped to engage with research and evidence based practice. This paper presents an in-depth analysis of focus group data from 120 senior midwifery students at six British universities to explore the experience of learning to be a midwife. Thematic analysis of the data suggests the following themes pertain to the experience of a number of students: 'teach yourself midwifery', knowing it all, right way of doing things, the importance of physical skills. These themes suggest a dissonance for some students between the andragogical methods of learning espoused by universities, and the expectations of students, who express the belief that there is a fixed and finite body of knowledge, without which they feel disempowered, anxious and ill-prepared for clinical practice. This paper argues that there are unresolved tensions between the perceived demands of practice environments and regulatory bodies and the philosophical stance of universities. For some students the concept of a broad discursive education is a distraction from training in discrete clinical skills. (Author)

20130916-123

Student attrition in the Ontario Midwifery Education Program: A qualitative analysis - Part II: Personal issues.

Neiterman E, Wilson R, Lobb DK (2013), Canadian Journal of Midwifery Research and Practice vol 12, no 2, Summer 2013, pp 30-36, 41

Student attrition in the health care field is a persistent issue. To identify the factors associated with student midwives leaving their university program, we developed an Internet survey. Participants included senior-level students, graduates of the program, and those students that withdrew prior to graduation. This is phase II of qualitative analysis, and we have analyzed students' written comments and found that finances, family obligations, and the midwifery model of practice and its associated lifestyle are areas where we might develop interventions to reduce student attrition. (20 references) (Author)

20130909-34

What does midwifery mean to me?. Braid H (2013), The Practising Midwife vol 16, no 8, September 2013, pp 33-34

The winning entry for the StudentMidwife.NET elective placement to Tanzania. Helen Braid explains what midwifery means to her. (4 references) (Author)

20130909-13

Uganda placements. Howard R (2013), The Practising Midwife vol 16, no 8, September 2013, pp 6-7

Now that she and fellow students have been to Uganda, Rebecca Howard reflects on their experience and the differences between Uganda and the UK. (1 references) (Author)

20130806-54*

Undergraduate midwifery students' sense of belongingness in clinical practice. McKenna L, Gilmour C, Biro MA, et al (2013), Nurse Education Today vol 33, no 8, 2013, pp 880-883

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Clinical placements form a large and integral part of midwifery education. While much has been written about nursing students' clinical placements, less is known about clinical experiences of undergraduate midwifery students. In nursing, belongingness has been demonstrated to be a key factor in clinical learning but little is known about this in midwifery education.

OBJECTIVES:

This study sought to examine undergraduate midwifery students' sense of belongingness in their clinical practice.

DESIGN:

A quantitative design using an online questionnaire was employed. A tool adapted by Levett-Jones (2009a), and previously used with nursing students, was utilised to examine sense of belonging in undergraduate midwifery students.

PARTICIPANTS:

Sixty undergraduate midwifery students from two campuses at one Australian university participated in the study. Students were drawn from a single Bachelor of Midwifery degree and a double Bachelor of Nursing/Bachelor of Midwifery degree.

METHODS:

On completion of a scheduled lecture, students were invited by one of the researchers to participate in the study by completing the online questionnaire and the link provided. Data were analysed using descriptive statistics.

RESULTS:

Midwifery students generally reported similar perceptions of belongingness with previous studies on nursing students. However, a few differences were noted that require further exploration to fully understand.

CONCLUSIONS:

Midwifery students experienced a sense of belonging in their clinical placements. The findings contribute to understandings of the experiences for midwifery students and provide a foundation on which to develop future clinical placement experiences. (Author)

20130710-15

Studying midwifery in the UK as an overseas student. Del Carmen Rubio-Batanas M (2013), British Journal of Midwifery vol 21, no 7, July 2013, p 530

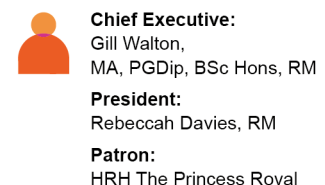
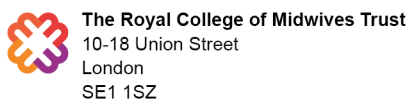
Student midwife Maria Del Carmen Rubio-Batanas notes the differences in worldwide midwifery. (4 references)
(Author)

20130710-11

Home visits by student midwives in the early postnatal period - a qualitative study of students' reflections. Aune I, Lilleengen AM (2013), British Journal of Midwifery vol 21, no 7, July 2013, pp 510-519

Objective: The aim of this study was to gain insight into the reflections of student midwives in their encounters with women and their families during home visits a few days after birth. **Design/setting:** 13 student midwives from Sør-Trøndelag University College and 10 student midwives from Oslo and Akershus University College each visited a woman they had supported during childbirth. These were healthy women with normal pregnancies and births. Following the visit, the students wrote reflection notes about their experiences. These qualitative data were analysed with the help of systematic text condensation, which is a modified version of Giorgi's phenomenological analysis. **Findings:** The findings include two main themes: 'experience of meaningfulness' and 'development of midwife identity'. The students described the visit during their practical studies as meaningful; they were personally involved and actively participating in the women's reflections on their birth experiences. The students experienced that building a relationship with women resulted in mutual confidence, trust and an experience of mastery, and the home visit provided them with the opportunity to make realistic observations of the new family. The students developed their midwife identity through a common experience and understanding, feedback from the women, and through an experience of personal growth and mastery. **Conclusions:** In an attempt to achieve high-quality midwifery skills, student midwives benefited from the home visit to the new family a few days after childbirth. A follow-up in the postnatal period gave the students meaningful practical training and valuable learning experiences. They experienced

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personal growth and were able to develop a midwife identity. The home visit gave the students an opportunity to end the relationship with a feeling of having completed the work. They experienced the importance of continuity of care by ensuring the families had a smooth transition to the follow-up appointments at a public health clinic. (44 references) (Author)

20130702-13

Nurturing the next generation: Midwives' experiences when working with third year midwifery students in New Zealand. James L (2013), New Zealand College of Midwives Journal no 47, June 2013, pp 14-17

Midwifery students require appropriate and timely access to clinical learning opportunities while completing a Bachelor of Midwifery and to achieve this they must be supported by practising midwives. This research sought to understand what supports midwives to work effectively with third year midwifery students. Midwives on the school's database who regularly worked with midwifery students were invited to participate in the research. Data were gathered using midwife focus groups. The results reveal i) most placements were a positive experience, ii) issues were described that related to the students' professional behaviour, iii) tensions were experienced by the midwife between the needs of the woman and the needs of the student and iv) tensions were experienced by the midwife as they moved between the roles of teacher, supporter and assessor of the student. Potential for further research is suggested. (16 references) (Author)

20130607-31

Becoming a midwife - a personal reflection on the challenging journey. Melton V (2013), British Journal of Midwifery vol 21, no 6, June 2013, pp 444-446

The author evaluates her three years as a student midwife and reflects on how her experiences have shaped the midwife she has become. (15 references) (SB)

20130607-30

The benefits to breastfeeding and success rates of a frenulotomy in newborns with ankyloglossia. Greenwood G (2013), British Journal of Midwifery vol 21, no 6, June 2013, pp 439-442

When undertaking the caseholding unit in my second and third years as a student midwife, I built a good rapport with the five women I was going to provide continuity of care for. Ms A, the woman this reflection is based on, was determined to breastfeed but it soon became apparent that the baby, Isobella, was not feeding successfully. When I saw how upset Ms A became and discovered she was considering ceasing breastfeeding, I was desperate to help. When I was assessing both Ms A and Isobella for the cause I identified ankyloglossia. I believe without the ability to recognise ankyloglossia (tongue-tie) many women will discontinue breastfeeding prematurely, which can be an upsetting decision. This reflection will identify and, to an extent, critically evaluate the literature surrounding the benefits of a frenulotomy when ankyloglossia is present in the newborn, with the aim to improve breastfeeding outcomes. Breastfeeding is a pertinent topic in current midwifery, and I believe this reflection will create an awareness of one of the possible reasons women stop breastfeeding, and how we as professionals can prevent this with timely recognition and treatment. (23 references) (Author)

20130607-12

'Chasing the numbers': Australian Bachelor of Midwifery students' experiences of achieving midwifery practice requirements for registration. Licqurish S, Seibold C (2013), Midwifery vol 29, no 6, June 2013, pp 661-667

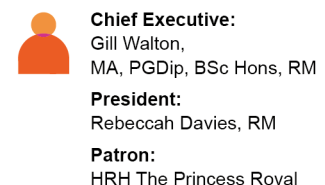
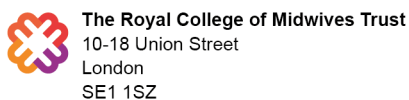
OBJECTIVE:

to explore one aspect of the findings from a qualitative study exploring Australian Bachelor of Midwifery students' experiences of achieving competency for beginning practice.

DESIGN:

a qualitative study using grounded theory, incorporating situational analysis. Data were collected by interviews, field

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observation and students' documents.

SETTING:

one university in Victoria, Australia, which was a member of a consortium of universities that first implemented Bachelor of Midwifery curricula.

PARTICIPANTS:

19 women, aged 20-40 years, completing the Bachelor of Midwifery course between the years 2005 and 2008.

FINDINGS:

data analysis revealed an overarching social process of assimilation, and three related subprocesses namely realisation, adaptation and consolidation. This paper focuses on consolidation in terms of competency achievement in relation to set requirements.

KEY CONCLUSIONS:

while generally found competent for beginning practice, the Bachelor of Midwifery students in this study felt that their ability to achieve competency according to professional midwifery standards, was constrained by the restricted nature of midwifery practice and medical dominance in the hospitals where they were placed. Furthermore, they found it challenging to achieve the minimum midwifery experience requirements, as well as their own personal learning objectives, within the clinical practicum hours provided in the curriculum.

IMPLICATIONS FOR PRACTICE:

a review of the clinical hours provided by Bachelor of Midwifery curricula is required, with a view to ensure that clinical hours are consistent with recommended hours suggested by Australian Bachelor of Midwifery course accreditation standards. Universities implementing midwifery curricula in Australia need to be cognisant of the theory-practice gap and therefore the applicability of professional competency standards to the education of midwives. The concerns about the reliability of competency standards need to be addressed. Finally, further research is required to validate the current number of, minimum practice experience required for competency for beginning practice and registration as a midwife in Australia. (47 references) (Author)

20130606-52

Student attrition in the Ontario midwifery education programme. Wilson R, Eva K, Lobb DK (2013), Midwifery vol 29, no 6, June 2013, pp 579-584

OBJECTIVE:

to identify the factors associated with student withdrawal during their university training.

DESIGN:

an Internet-based survey questionnaire was designed and administered.

SETTING:

two universities in Ontario, Canada.

PARTICIPANTS:

senior level students in years three and four, graduates of the programme and those students that withdrew prior to graduation.

FINDINGS:

students who withdrew from the programme were more likely to report not feeling academically supported and not being prepared for the time commitments required. Students with the greatest risk for leaving the programme were those that took a leave of absence, over half of which were maternity leaves.

CONCLUSION:

having identified those significant factors associated with student attrition, we can now begin to develop specific interventions to improve retention rates. (21 references) (Author)

20130523-34

Working and learning: Post-registration student midwives' experience of the competency assessment process.

Bradshaw C, Noonan M, Barry M, et al (2013), Midwifery vol 29, no 5, May 2013, pp 519-525

AIM: to explore student midwives experiences of the Clinical Competency Assessment process utilised on the Higher

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Diploma in Midwifery (18 month) programme. **BACKGROUND:** the assessment of clinical skills and practice has traditionally been an integral part of midwifery educational programmes; however the method of clinical assessment has changed and developed. Similar to other countries, in Ireland assessment of clinical practice is achieved through the utilisation of a broad competency framework provided by the regulatory body, An Bord Altranais (2005) which is yet to be evaluated from a midwifery perspective. **METHOD:** a descriptive qualitative study was undertaken once ethical approval had been granted by the University's Ethics Committee. All student midwives (n=20) in one cohort were invited to participate and nine students were interviewed. Interviews were tape recorded. Data were analysed using Burnard's (2006) framework. **FINDINGS:** the process of competency assessment was perceived by many of the students to facilitate continuous assessment of clinical practice but there were issues in relation to the language and the number of competencies to be assessed. There were challenges also associated with the written evidence required as part of the assessment with many of the students questioning the usefulness of this in a clinical assessment. A variety of supports were identified and utilised by the students. Continuity and availability of preceptors were noted to be factors impacting on completion of the assessment as were the competing demands of clinical care. **RECOMMENDATIONS:** the findings of this small study are congruent with much of the international literature focusing on clinical competency models. Consideration needs to be given to identifying and integrating into practice, a clearly defined process for competency assessment, by all the relevant stakeholders. An opportunity for feedback throughout the process is considered very significant and the mechanism for this needs to be made explicit in any competency assessment documentation. Competency documentation currently in use needs to be reviewed in light of the findings of this study and the rationale for inclusion of a written evidence component needs to be carefully considered. Further research is warranted in relation to the effectiveness of the competency tool in assessing competency in practice. (29 references) (Author)

20130521-14

A touch of 'Aloha' An experience of midwifery in Hawaii and the Mid-Pacific Conference on Birth and Primal Health.

Nutt C (2013), MIDIRS Midwifery Digest vol 23, no 2, June 2013, pp 250-253

In October 2012 I was granted a four week travel option as my student midwife elective placement. Facilitated by an Iolanthe Midwifery Trust and MIDIRS bursary award, I chose to go to Hawaii. With friend and fellow UWE (University of the West of England) student midwife Hayley Fallows, I negotiated three parts to the placement: a week with traditional 'lay' midwife Clare Loprinzi, two weeks with Claudia Brown and her team at Home Birth Kaua'i and three days at the Birth and Primal Health conference in Honolulu as a grand-finale. Nationally, midwifery remains suppressed in the US, with high rates of hospital births (98.8%) and caesarean sections (38.2% in 2010) and many different midwifery paths leading to a feeling of fragmentation, endangerment and 'battle' (Simkins 2011, Martin et al 2012). However, my experiences of midwifery on the Big-Island and Kauai demonstrated inspiring models of midwifery care with positive rippling effects on local communities. (9 references) (Author)

20130520-16

The midwifery student's reading. Mander R (2013), MIDIRS Midwifery Digest vol 23, no 2, June 2013, pp 151-154

Rosemary Mander discusses the midwifery student's variable ability to access and use reading material and draws attention to some of the issues which the student and the midwifery educator may encounter. The author highlights the various techniques used by students when studying and the obvious impact of the web as a resource. (17 references) (ABS)

20130502-25

Students' perceptions of the follow-through experience in 3 year bachelor of midwifery programmes in Australia.

Gray J, Leap N, Sheehy A, et al (2013), Midwifery vol 29, no 4, April 2013, pp 400-406

Background: providing opportunities for students to participate in midwifery continuity of care experiences is a challenge in many midwifery education programmes. The 'follow-through experience' was a deliberate strategy introduced into midwifery education programmes in Australia to ensure that students experienced midwifery

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continuity of care. The follow through experience provides an opportunity for midwifery students to follow a pre-determined number of women through pregnancy, labour and birth and into the early parenting period. Aim: the aim of this study was to explore the follow-through experience in the 3 year Bachelor of Midwifery (direct entry) in Australia to better understand its impact on midwifery students and to identify the learning that is associated with this experience. Methods: a qualitative methodology was used. Data were collected from former and current Bachelor of Midwifery students through a survey and telephone interviews. Students from all 3-year pre-registration Bachelor of Midwifery programmes in Australia were invited to participate. A thematic analysis was undertaken. Constructivist learning theories were used to identify whether learning occurred in the context of the follow-through experience. Findings: students do learn from their engagement in midwifery continuity of care experiences. Learning was characterised by the primacy of the relationship with the women. Students also identified the challenges they faced which included recruitment of women and finding the time to fully engage with the follow-through experience. Difficulties were identified around the different requirements of the follow-through experience, the lack of support at times for students and the incongruence with the existing maternity system. These issues impacted on students' ability to engage in and maximise their learning. Conclusions: the follow-through experience is an innovative midwifery education strategy that facilitates learning for midwifery students. Challenges need to be addressed at a systematic level and new strategies developed to support the learning opportunities presented by the follow-through experience. (27 references) (Author)

20130319-23

'A good midwife stands out': 3rd year midwifery students' views. Carolan M (2013), *Midwifery* vol 29, no 2, February 2013, pp 115-121

Background: the midwifery workforce in Australia is ageing and predominantly part-time. There is considerable interest in the induction and retention of new midwives in the profession. Objective: this study was undertaken to explore 3rd year students' views of the good midwife. It was anticipated that student views would show evidence of early transition and socialisation into the profession. Design: qualitative thematic analysis. Setting: Melbourne, Australia. Participants: all completing midwifery students, in 2010, were invited to participate (n=31). Findings: three broad themes emerged from the analysis: (1) a skilled practitioner; (2) a caring and compassionate individual; and (3) beyond the call of duty: passion and enthusiasm for midwifery. Key conclusions and implications for practice: it was evident that 3rd year students' views of the good midwife were becoming aligned with the views of qualified midwives. Students also acknowledged the importance of safe practice at the same time as supporting women to make decisions. However, their intense passion and enthusiasm for midwifery practice may make them vulnerable to disappointment with the profession. (39 references) (Author)

20130319-20

How well does midwifery education prepare for clinical practice? Exploring the views of Swedish students, midwives and obstetricians. Schytt E, Waldenstrom U (2013), *Midwifery* vol 29, no 2, February 2013, pp 102-109

Background: midwifery education in many countries has been adapted to the academic system by a stronger focus on research methodology and scientific evidence. This development has often taken place without extending the programs. We were interested in exploring views about current content of midwifery education in Sweden with a focus on clinical competencies and the new research components. Objective: to investigate views about Swedish midwifery education held by students prior to graduation and after 1 year of practice, and by experienced midwives and obstetricians, with special focus on clinical competency. Design: nationwide surveys conducted between June 2007 and January 2008, and 1 year later (follow-up of students).

Methods: self-administered questionnaires completed by 171 (83%) students and 121 (59%) of these participants after 1 year of midwifery practice, and by 162 (54%) midwives and 108 (40%) obstetricians with at least 5 years of clinical experience. The responders were asked to assess predefined intrapartum competencies, which components of the education were allocated too little and too much time, and how well the education prepared for clinical practise overall. Content analysis of open-ended questions and descriptive analyses was used. Findings: most students, midwives and obstetricians were 'very' or 'fairly' satisfied with how the education prepared midwives for clinical

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practice and 1.8%, 4.7% and 17.6%, respectively, were dissatisfied. About half of the obstetricians and one-third of the experienced midwives rated new midwives' ability to identify deviations from normal progress as low or lacking, compared with 10% of the students. A majority found that too little time, of the 60 weeks programme, was allocated to intrapartum care and medical complications and too much time to research and writing a minor thesis. Key conclusions: although few were dissatisfied with how midwifery education prepared for clinical practice in general, the majority of participants would have liked more time for medical complications, intrapartum care, and emergency situations, and less for research. These findings suggest that the balance between clinical competency and research, and how the research component is integrated into clinical knowledge, should be further discussed and evaluated. Also the discrepancy between the views of newly educated midwives and those of more experienced midwives and obstetricians need further investigation. (20 references) (Author)

20130307-49*

Student midwives' views on maternity care just before their graduation. Van Kelst L, Spitz B, Sermeus W, et al (2013), *Journal of Advanced Nursing* vol 69, no 3, 2013, pp 600-609

Aim. To report a hermeneutic study of student midwives' views on maternity care just before their graduation.


Background. Woman-centred care, which is the hallmark of midwifery, is taught to midwifery students around the globe. Woman-centred care is advantageous for women at low obstetric risk. However, adopting this ideology might be a problem for student midwives whose clinical placements are mainly in a medicalized obstetric-led hospital setting. **Design.** A hermeneutic phenomenological study was conducted. **Methods.** In 2010, three focus groups were held where 19 student midwives participated. Data were transcribed verbatim and analysed using van Manen's approach. **Findings.** The choice for midwifery was a 'positive' choice and not the result of an elimination process. Students' description of a midwife as a coach was in line with the international definition of a midwife. With regard to maternity care, midwifery students identified two types of care, factory-style care and tailored care, both of which were ascribed to caregivers and hospital culture. Furthermore, student midwives made the distinction between hierarchy and teamwork, referring to the professional relations in maternity care. Hierarchy was driven by tradition, it implied that decisions were made top-down, and it resulted in impersonal relations. Midwifery students felt it was unjust that midwives were not allowed to perform deliveries while having the legal autonomy to do so. **Conclusion.** In spite of the medicalized context, midwifery education succeeded in educating midwives who hold a woman-centred ideology. Midwifery students linked style of care to a person rather than to a profession. (Author)

20130213-37*


An exploration of student midwives' experiences of the Objective Structured Clinical Examination assessment process. Barry M, Noonan M, Bradshaw C, et al (2012), *Nurse Education Today* vol 32, no 6, 2012, pp 690-694

This paper reports on a qualitative descriptive study that explored student midwives' experiences of the Objective Structured Clinical Examination assessment process for obstetric emergencies within a university setting. The development of fundamental clinical skills is an important component in preparing students to meet the responsibilities of a midwife. There is an international concern that the transfer of midwifery education into universities may impact on the development of midwifery clinical skills. Objective Structured Clinical Examinations (OSCEs) have the potential to promote integration and consolidation of skills prior to clinical placement. Twenty six students (n=36) from two midwifery programmes (BSc and Higher Diploma) participated in four focus groups and Burnard's (2006) framework was used for data analysis. Three main themes emerged following analysis: preparation for the OSCE assessment, the OSCE process and learning through simulating practice. Preparation for the OSCE's which included lectures, demonstrations, and practice of OSCE's facilitated by lecturers and by the students themselves, was considered central to the process. Learning via OSCEs was perceived to be more effective in comparison to other forms of assessment and prepared students for clinical practice. Positive aspects of the process and areas for improvement were identified. Using OSCE's increased the depth of learning for the students with the steps taken in preparation for the OSCE's proving to be a valuable learning tool. This study adds to the evidence on the use of OSCE's in midwifery education. (Author)

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20130213-35*

The feelings of guilt and shame experienced by Nursing and Midwifery students. Kaya N, Asti T, Turan N, et al (2012), Nurse Education Today vol 32, no 6, 2012, pp 630-635

AIM:

Feelings of guilt and shame might affect the abilities of nursing and midwifery students when fulfilling their roles assertively and with professional autonomy during the interdisciplinary care and treatment process. The present study was conducted in order to examine the feelings of guilt and shame experienced by nursing and midwifery students with respect to certain variables.

METHODS:

The population of this study, which had a cross-sectional design, comprised a total of 1002 students from three training locations: a school of nursing, the nursing program of a health vocational school, and the midwifery program of a health vocational school. From this population, 667 students were recruited to the study by a stratified random sampling method. Personal Information Forms and a Guilt-Shame Scale were used as data collection tools.

RESULTS:

From amongst the students, 88.6% were women. The average age was 20.57 years; the mean scores of the guilt and shame subscales were 50.51 and 43.63, respectively. Statistically significant differences were observed between the guilt-shame scores of the students by the variants of gender, age, school, and year at school.

CONCLUSIONS:

The present study concluded that midwifery and nursing students experience measurable feelings of guilt-shame and that the levels of guilt-shame had an impact on their targets regarding nursing/midwifery. Therefore, it is suggested that guidance programmes be established and that the related problems be resolved. (Author)

20121123-26

Innovative strategies for 21st century perinatal nursing education. Simonelli MC, Gennaro S (2012), MCN - American Journal of Maternal/Child Nursing vol 37, no 6, November/December 2012, pp 373-378

The birthrate in the United States has been steady for the past few years with childbearing women being older, less likely to be married, better educated, and more likely to be an immigrant than were childbearing women of their mothers' generation. Women giving birth in the United States today are increasingly likely to experience a cesarean birth and/or an induction of labor. These changes in the demographic and experience of childbearing women occur at the same time that the learning style of nursing students is also changing. As a result nurse educators have developed new teaching strategies to prepare students to provide culturally competent and technically sound care, while acting as team members for women having babies in the United States. Techniques such as simulation are discussed as are alternative clinical education placements in community settings. (31 references) (Author)

20121107-24

Making the most of your elective placement. Price C (2012), British Journal of Midwifery vol 20, no 11, November 2012, p 834

Cheri Price, newly qualified midwife, discusses the benefits of an elective placement. (Author)

20121105-75

Student midwives are our future. Page L (2012), The Practising Midwife vol 15, no 10, November 2012, p 5

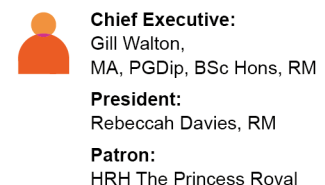
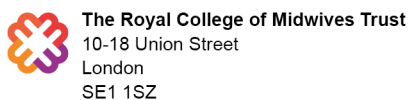
Comments on the difficulties facing student midwives in the UK today as they struggle to find jobs once they have qualified. (MB)

20121012-29

Cheri's top tips for new students. Price C (2012), British Journal of Midwifery vol 20, no 10, October 2012, p 758

Cheri Price, newly qualified midwife, provides her top tips for surviving midwifery training. (Author)

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20120919-9

This is how we do it. Uppal E (2012), *The Practising Midwife* vol 15, no 8, September 2012, pp 27-29

The purpose of this article is to explore students' experiences of variations in practice and how this impacts on their learning. This is particularly pertinent in terms of reconfiguration of services instigated by the Department of Health's (DH) Making it better agenda (DH 2007), meaning that many qualified staff are moving hospitals and also experiencing changes in practice. Students are thus being mentored by a range of mentors in a variety of settings, which can often mean that practice can be perceived as inconsistent and even idiosyncratic (Jones et al 2005). This writing is unique in that the midwifery lecturer facilitated the students' development of the work in a truly collaborative piece, developed through a writing and journal club. All details of the practice placements and the student comments have been anonymised. (14 references) (Author)

20120828-4

Pre-university students' attitudes and beliefs about childbirth: implications for reproductive health and maternity care. Palumbo CS, Tomkinson J, Klein MC (2012), *Canadian Journal of Midwifery Research and Practice* vol 11, no 2, Summer 2012, pp 27-37


Objectives: To determine pre-university students' attitudes and beliefs about childbirth and identify key sources of information and knowledge. **Methods:** A survey of 359 Quebec pre-university students (215 female, 144 male) was undertaken to identify sources of beliefs about birth and opinions about types of maternity care providers and place/method of delivery. **Results:** Prime sources for birth beliefs were family (50.7% female, 39.9% male) and media (21.9% female, 33.6% male). The dominant preferred birth model was hospital vaginal delivery attended by an obstetrician. The students' birth preferences reflected strong support for professional supervision/intervention and scepticism about the safety of home birth and out-of-hospital birth centres. Although 9.3% of female students and no males would choose elective cesarean section (CS) for themselves or partner, 71.2% of female students and 42.2% of male students agreed that CS is 'just another way of having a baby.' Most female students believed 'it is a woman's right to choose CS for herself' and had a higher preference/acceptance of CS, compared with male students. Students characterized birth as 'painful' and 'miraculous' and agreed on its relative safety. Female students were more fearful and more stressed about the prospect of birth, compared with male students. Over 75% of female students were aware of the benefits of breastfeeding and planned to breastfeed. **Conclusions:** Most students supported in-hospital maternity care and perceived CS as normal but did not express a preference for CS for themselves or their partners. Students were unaware of the risks/benefits of CS, epidurals, and out-of-hospital birth. These findings highlight the need for health care professionals to engage young adults and to provide them with evidence-based information about maternity care options. (22 references) (Author)

20120813-22*


Writing skills for nursing and midwifery students. Taylor DB (2013), London: SAGE Publications Ltd 2013. 224 pages

Nursing and midwifery students are required to communicate in writing in a variety of forms, for a variety of potential audiences including their colleagues, allied health professionals, administrators and, most importantly, their patients and the public. Dena Bain Taylor is an experienced teacher of writing and critical skills across the range of allied health professions, and understands the types of writing nursing and midwifery students do and the writing issues they face. Her accessible, straightforward book - tailored specifically to the content and conventions of nursing and midwifery curricula - teaches students to write persuasively and correctly, both to support them in their courses and to prepare them for their professional careers. The book:- offers practical strategies for using language to achieve clear, persuasive writing; - provides clear explanations of underlying principles; - contains samples of good and improvable writing, leading the student step-by-step through the whole writing process; - focuses on the genres and styles of writing that nursing and midwifery students are typically asked for. With regular summaries, learning aids, checklists and a glossary of key terms, nursing and midwifery students at all levels will find this book easy to follow and handy to refer to for help with the writing they need to do throughout their course. (Publisher)

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20120808-9

'It opened my mind': student midwives' views of a motherhood and mental health module. Higgins A, Carroll M, Sharek D (2012), MIDIRS Midwifery Digest vol 22, no 3, September 2012, pp 287-292

Despite the prevalence of mental health problems during the prenatal and postnatal period, midwives are reluctant to engage with women due to lack of knowledge, skill and confidence. This paper reports on student midwives' views on an elective module on motherhood and mental health issues that was incorporated into an undergraduate direct entry midwifery programme. Findings from the evaluation suggest that students were very positive about their learning experience and reported being less fearful and stigmatised, as well as gaining enhanced knowledge and confidence. (22 references) (Author)

20120608-4*

Numeracy skills of undergraduate entry level nurse, midwife and pharmacy students. Arkell S, Rutter P (2012), Nurse Education in Practice vol 12, no 4, July 2012, pp 198-203

Background: The ability of healthcare professionals to perform basic numeracy and therefore dose calculations competently is without question. Research has primarily focused on nurses, and to a lesser extent doctors, ability to perform this function with findings highlighting poor aptitude. Studies involving pharmacists are few but findings are more positive than other healthcare staff. Aims: To determine first year nursing, midwifery and pharmacy students ability to perform basic numeracy calculations. Method: All new undergraduate entrants to nursing, midwifery and pharmacy sat a formative numeracy test within the first two weeks of their first year of study. Results: Test results showed that pharmacy students significantly outperformed midwifery and nursing students on all questions. In turn midwifery students outperformed nurses, although this did not achieve significance. When looking at each cohorts general attitude towards mathematics, pharmacy students were more positive and confident compared to midwifery and nursing students.

Conclusion: Pharmacy students expressed greater levels of enjoyment and confidence in performing mathematics and correspondingly showed the greatest proficiency. In contrast nurse, and to a lesser extent midwifery students showed poor performance and low confidence levels. (Author)

20120515-3

Follow-up of women until 6 weeks after delivery: students' experiences. Modiba LM (2012), African Journal of Midwifery and Women's Health vol 6, no 2, April-June 2012, pp 59-64

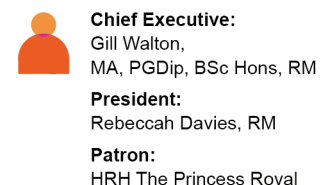
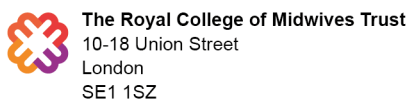
The aim of this study was to explore and describe student midwives' experiences on the follow-up of a woman from pregnancy, birth and post-partum until 6 weeks after delivery. The research design was qualitative, descriptive, exploratory and contextual. A purposive sampling was used and 21 student midwives who enrolled for midwifery consented to be part of the study. Semi-structured face-to-face interviews were conducted with the student midwives after completing this project. These interviews were tape recorded and transcribed verbatim by an independent transcribing service. The findings in relation to the research question were synthesized under three themes: building relationships with the follow-up women; challenges associated with the follow-up experience; and positive aspects of this experience. Conclusion: The follow-up experience provided midwifery students with unique and important learning opportunities that they would not experience in standard or hospital-based clinical placements alone. (18 references) (Author)

20120502-3*

Promoting normal birth - the student midwives contribution. Sidebotham M (2012), MIDIRS Essence issue 62, May 2012

A senior midwifery lecturer discusses the rise in the rate of medical intervention in childbirth and argues that the student midwife, because their knowledge of the evidence-base is current and they often are able to be with the same woman from the earliest antenatal period through to the postnatal period may be able to make a difference to the woman's birth experience. (3 references) (JR)

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20120411-91*

Journal of a student midwife. Ryan E (2012), Sussex: Book Guild Publishing 2012. 284 pages

Ever since she had her own children in her early twenties, Ellie Ryan was determined to become a midwife - 'the best job in the world'! After her children started school, Ellie began the demanding training she needed to achieve her ambition. Ellie kept a blog-style journal throughout her training; the result combines laughter and friendship with poignant reminders that life is never as simple as we would like it to be. There are high points as Ellie takes steps towards reaching her goal; gaining confidence in her profession and helping women bring their babies into the world. On the other hand, Ellie worries that she will never have what it takes to become 'a proper midwife' and feels terrible guilt about the detrimental effect her pursuit of this career could be having on her family. This real-life story provides an intimate and candid account of the author's journey towards becoming a midwife and the struggle to balance her professional and family life. (Publisher)

20120214-18

Problem-solving and communication skills in clinical practice: A reflection. Younger M (2012), British Journal of Midwifery vol 20, no 2, February 2012, pp 135-138

As part of pre-registration midwifery education, the Nursing and Midwifery Council stipulates that students need to progressively develop essential key skills including problem-solving and communication. It is insufficient for these skills to be understood on a purely academic level; they need to be applied in clinical practice. This reflective account illustrates how progression and attainment of these skills and the application thereof is an achievable standard. Additionally it demonstrates the requirement for students to build on these skills so that they learn to effect positive outcomes in challenging situations which occur frequently in the midwifery profession. (21 references) (Author)

20120214-17

Evaluating enquiry-based learning in a new pre-registration programme. Hamilton C, Yearley C, Boyle S (2012), British Journal of Midwifery vol 20, no 2, February 2012, pp 129-133

In accordance with the need to provide contemporary midwifery education which meets the Nursing and Midwifery Council (NMC) (2009) standards, the pre-registration midwifery education programme at the University of Hertfordshire underwent a major curriculum development in 2008, which afforded the opportunity to review the existing learning and teaching strategies. The curriculum development team were keen to develop an education programme which would enable student midwives to develop the necessary skills associated with adult learning and encourage individual responsibility for life-long learning (NMC, 2010) in the belief that such skills would help prepare student midwives to be better equipped to cope with both the demands of the programme and the challenges of contemporary midwifery practice. The learning and teaching strategy of enquiry-based learning (EBL) was introduced as a key feature throughout the 3-year midwifery programme. This article presents an evaluation of the introduction of EBL for a group of first-year students as they progressed through the first year of their midwifery training. It reports on some of the emerging themes from the students' perspectives from their experience of EBL and on the resulting changes which occurred in response to the findings from a series of facilitated student focus group meetings. (Author)

20120119-2*

Get into nursing and midwifery. A guide to application and career success. Snow S (2012), Harlow: Pearson Education Limited 2012, 135 pages

This book is a helpful companion for those hoping to become nurses or midwives. Applications to nursing and midwifery courses are on the rise, and with limited university places available, competition is high. Includes and introduction to midwifery, entry routes, applications, and pre-course preparation. (Publisher, edited)

20120105-105

For the love of the job. Wilson H (2012), Practising Midwife vol 15, no 1, January 2012, p 54

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Hannah Wilson casts a very positive eye over her experience of being a student midwife - and looks ahead with eager anticipation to the challenges in store for her. (Author)

20111222-18

Developing evidence-based practice among students. Emanuel V, Day K, Diegnan L, et al (2011), Nursing Times vol 107, no 49/50, 13 December 2011, pp 21-23

In response to government initiatives and the rise in patient empowerment, nurses are increasingly being challenged to deliver high-quality care supported by evidence-based practice. This can be a challenge for nurse educators providing the foundation for pre-registration student nurses. Evidence-based practice within nursing is achieved by developing and supporting patient-centred approaches to care using the most current evidence. This facilitates the development of a questioning approach incorporating the four principles of healthcare ethics - beneficence, non-maleficence, autonomy and justice. (25 references) (Author)

20111207-8

Student morale is at rock bottom. (2011), Practising Midwife vol 14, no 11, December 2011, p 8

Reports that surveys carried out by the Royal College of Midwives have found that morale among student and newly qualified midwives is plummeting due to accumulated debts and uncertainty about securing employment after graduation. (CI)

20111202-12

A qualitative study exploring student midwives' experiences of carrying a caseload as part of their midwifery education in England. Rawnsom S (2011), Midwifery vol 27, no 6, December 2011, pp 786-792

OBJECTIVE: to explore student midwives' experiences of caseloading to develop an understanding of how they perceive this educational strategy has impacted on their learning journey to becoming a midwife. **DESIGN:** a qualitative approach drawing upon the principles of grounded theory. Data were collected by in-depth semi-structured interviews. **SETTING:** a university in the South of England providing undergraduate pre-registration midwifery education across Advanced Diploma and BSc (Hons) programmes. **PARTICIPANTS:** eight Caucasian female final-year student midwives aged 23-50 years who had completed their caseloading experience. **FINDINGS:** one core category ('making it good') and four major categories emerged: (1) 'developing and managing caseload', (2) 'learning partnerships', (3) 'feeling like a midwife' and (4) 'afterwards'. The core category was reflected in all the other categories and was dependent upon them. **KEY CONCLUSIONS AND IMPLICATIONS FOR PRACTICE:** students identified caseloading as a highly beneficial learning approach, facilitating application of theory to practice and acquisition of new skills promoting confidence and competence in practice. Students articulated an overwhelming desire and concern to meet and facilitate women's expectations. Perceptions of letting the woman down evoked feelings of inadequacy and failure. Flexible working practices, on-call commitment and carrying a caseload alongside academic and home commitments was, for many, emotionally stressful. Effective preparation of students for the realities of caseloading, the development of realistic caseloads that take account of the student's individual situation, and the provision of supportive frameworks are essential. (46 references) (Author)


20111115-5*

Student and newly qualified midwives employment survey. Royal College of Midwives (2011), London: Royal College of Midwives November 2011. 27 pages


Survey of student midwives and newly qualified midwives to investigate current issues in employment including how many have found midwifery jobs, numbers of full time and part time jobs, how many are permanent or temporary, and how long it takes to secure a post. (JR)

Full URL: <http://www.rcm.org.uk/EasySiteWeb/GatewayLink.aspx?allid=184253>

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20111115-36

Caring in clinical practice: experiences and perceptions of learner midwives. Chokwe M, Wright S (2011), Evidence Based Midwifery vol 9, no 4, December 2011, pp 125-130

Background. There is a growing concern about the lack of caring in midwifery clinical practice. In addition findings of studies exploring health-seeking behaviours in South Africa indicated the abuse of the pregnant women by midwives as the most important reason causing a delay in seeking health care. Objective. To explore the experiences and perceptions of the learner midwives of caring as exhibited by qualified midwives during midwifery clinical practice. Methods. A qualitative and phenomenological study was done. Ethical clearance was granted by the university and the managers of the hospitals where the Baccalaureus Technologiae II and III learner midwives were placed for work-integrated learning. Three self-report techniques used were diaries, debriefing sessions with reflection and focus group. Findings. Data from 48 diaries and two focus groups were analysed using a qualitative approach. Care of the women and midwife-related themes emerged, each with caring and uncaring as major categories. The findings illustrated that the learner midwives were familiar with and internalised the meaning of caring from the theoretical facilitation, however they did not always experience caring in midwifery clinical practice. Some of the midwives were caring, but the majority did not role model commitment, competence, compassion, confidence and communication. Implication for practice. Managers must be held accountable for setting, implementing and maintaining caring standards in the healthcare institutions. Furthermore, there is a need to emphasise the importance of role modelling and ensure that the affective aspect of caring is communicated to the learner midwives during theoretical facilitation and clinical practice. (26 references) (Author)

20111115-3*

The Royal College of Midwives' survey of student midwives 2011: UK national survey. Royal College of Midwives (2011), London: Royal College of Midwives October 2011. 24 pages

Survey of student midwives to investigate how policy changes in health services and higher education institutions have impacted on maternity services, provision of education and therefore upon student midwives themselves. (19 references) (JR)

Full URL: <http://www.rcm.org.uk/EasySiteWeb/GatewayLink.aspx?allid=184241>

20111010-37*

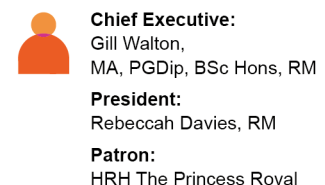
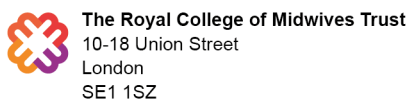
Nursing and midwifery college students' expectations of their educators and perceived stressors during their education: A pilot study in Turkey. Cilingir D, Gursoy AA, Hintistan S, et al (2011), International Journal of Nursing Practice vol 17, no 5, 2011, pp 486-494

Nursing and midwifery education is known to be negatively affected by several factors. Nevertheless, the present learning environments for students can be effectively altered to optimize their learning and practical training and decrease their stress levels. In order to minimize the stressors and to encourage the qualities needed of a competent educator, it would be important to first determine students' perceived stressors and the expectations they have of their educators. The main purpose of the study was to define the expectations that nursing and midwifery college students have of their educators as well as the stressors they perceive during their education. The present descriptive study was carried out with 474 students; there were 345 nursing students and 129 midwifery students at a college in northeastern Turkey. Data were obtained with a questionnaire and assessed with X(2) analyses. The findings of the study demonstrated that a majority of the students had some expectations of the educators and perceived stressors during their education. The students' most common expectations of the educators included their desire to be understood during their clinical education. In addition, students wanted the educators to make more use of visual materials during the theoretical part of their courses. The study also determined that the students felt very stressed when they were questioned by the educator on both clinical and theoretical aspects of their coursework. (Author)

20111005-21

Undertaking midwifery studies: commencing students' views. Carolan M, Kruger G (2011), Midwifery vol 27, no 5, October 2011, pp 642-647

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OBJECTIVE: to explore the motivations and beliefs of commencing midwifery students against a background of high course demand and high student attrition. **DESIGN:** a qualitative analysis of student reflective essays. **SETTING:** Melbourne, Australia. **PARTICIPANTS:** all commencing midwifery students, in 2008, were invited to participate (n=41). **MEASUREMENTS AND FINDINGS:** three primary motivations for choosing midwifery were identified, including: notions of altruism (wanting to help), a fascination with pregnancy and birth, and a view of midwifery as a personally satisfying career. **KEY CONCLUSIONS AND IMPLICATIONS FOR PRACTICE:** Bachelor of Midwifery programmes attract students with idealised views about midwifery practice. Such views may lead to student disillusionment, tensions with educators and clinicians, and higher rates of student attrition. Students need greater support to examine their views about midwifery practice. More meaningful support may assist the students' successful socialisation into clinical practice. (27 references) (Author)

20111003-11138

At the moment midwifery is my life and my family are my hobby. Robinson D, Kamo R, Wylie J (2009), Birthspirit Midwifery no 4, 2009, pp 9 - 15

To date, there has been no research exploring student midwives' experiences of undertaking a direct entry programme within New Zealand. However, research into women's experiences of undertaking other tertiary education has revealed that women may be confronted with gender specific challenges. This article reports the findings of a study conducted in 2006 that used a feminist phenomenological approach to identify the practical and emotional challenges six student midwives experienced over their three years of tertiary education. Three key themes were identified: transition; guilt and sacrifice; and gendered responsibility. The student midwives found the programme challenged them practically and, to a greater degree, emotionally. All students identified having undergone significant personal change. Students experienced differing degrees of guilt, associated with sacrifices they and the people close to them had made, and struggled with their sense of gendered responsibility. The findings raise questions about the level and type of support required when undertaking a direct entry midwifery degree programme, and we suggest that an increase in practical support may help alleviate emotional stress, and thus improve student midwives' experiences on their journey through midwifery education.

20110928-10

Hats off to new students at the University of Glamorgan. Davies J, Paterson M (2011), Practising Midwife vol 14, no 7, September 2011, pp 18-19

A hats ceremony has been initiated at the University of Glamorgan to welcome new student midwives. It is hoped that this ceremony will develop a sense of community and facilitate support amongst the student midwife population within the university. Students knitted hats to exchange with fellow students with a view to presenting the hat as a gift to the family at the first birth they assist. It is hoped that as a result of this 'hat exchange', friendship and support networks will be nurtured at this early stage of midwifery education, which may help the new student navigate this difficult yet rewarding journey to becoming a competent midwife. (3 references) (Author)

20110905-30

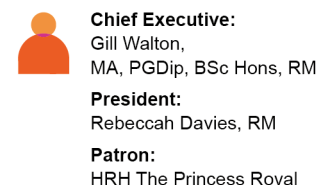
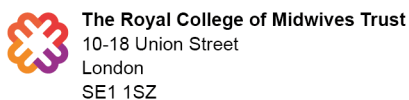
One hundred days as a direct entry student midwife: A personal account. Clarke E (2011), British Journal of Midwifery vol 19, no 9, September 2011, pp 600-602

This article discusses a personal experience of being a direct entry student midwife, with no previous practical experience of working within a maternity hospital or with labouring women. The author discusses some of the issues and feelings experienced during placement learning, shadowing midwives and weekly rotations around the hospital units. (4 references) (Author)

20110708-43*

An integrative literature review of student retention in programmes of nursing and midwifery education: why do students stay?. Cameron J, Roxburgh M, Taylor J, et al (2011), Journal of Clinical Nursing vol 20, no 9-10, 2011, pp 1372-1382

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AIMS AND OBJECTIVES: The purpose of the review was to identify student characteristics and strategies in research studies investigating retention (why students stay) as opposed to attrition (why students leave) nursing and midwifery preregistration programmes. **BACKGROUND:** Retention in nursing and midwifery programmes is a serious international problem. Many governments are committed to diversifying both the student population and the health care workforce. This has led to higher education institutes in some countries offering places on nursing and midwifery programmes to students with non-traditional entry qualifications. There are suggestions that the policy of widening access has contributed to the challenges of retention in nursing and midwifery programmes. **DESIGN:** Integrative literature review. **METHOD:** Undertaken using electronic databases and specific search terms, 15 articles were identified and reviewed. The critical appraisal tools produced by CASP (2009) were used to evaluate the quality of the data. Findings from the identified research literature were analysed using qualitative content analysis. **RESULTS:** Two broad themes emerged from the analysis: Programme and Personal. Subthemes were identified in these that give clues as to why students stay: profession, support, student characteristics and family. **CONCLUSIONS:** Personal commitment and good support seem to be essential for students to remain on undergraduate programmes of nursing and midwifery. The term 'support' is rarely explicit and requires to be more clearly defined. Furthermore, studies reviewed fail to indicate clearly how to identify when students are most vulnerable and which interventions are most appropriate in different situations in supporting retaining students on programmes. **RELEVANCE TO CLINICAL PRACTICE:** Nursing and midwifery student retention is a political and professional problem. Collaboration between clinical placement providers, academic institutions, students and their families is required to address the issue. Illumination of factors that help students stay may help us devise interventions that prevent future students leaving. (Author)

20110707-13

'SINK or SWIM': the experience of newly qualified midwives in England. Hughes AJ, Fraser DM (2011), Midwifery vol 27, no 3, June 2011, pp 382-386

OBJECTIVE: to explore newly qualified midwives' and preceptors' view of the preceptorship period. **DESIGN:** qualitative design utilising focus groups as a means of collecting data. **SETTING:** hospital trusts partnered with three Universities in England. **PARTICIPANTS:** in total there were 62 participants; 40 newly qualified midwives, 20 preceptors and two practice development midwives participated in focus group interviews. **FINDINGS:** the findings suggested that newly qualified midwives and preceptors found it difficult to meet due to time constraints and either working different shifts or in different clinical areas. In addition three main themes emerged in relation to what affected effective preceptorship. The most important areas to improve the preceptorship period were to appoint midwives responsible for the organisation and support of newly qualified midwives. In addition, each new midwife should have a programme tailored to their needs which avoids repetitive learning. **CONCLUSIONS:** the transition period causes anxiety for newly qualified midwives, especially when there is a long delay between qualification and taking up their first post. There appears to be some confusion over induction and preceptorship paperwork. The majority of midwives described their initial experience of working as a qualified midwife as 'SINK or SWIM'. (21 references) (Author)

20110706-18

The other side. Hibbert G (2011), Practising Midwife vol 14, no 7, July/August 2011, pp 16-17

Gemma had just returned to labour ward for her second year placement, her previous labour ward placements having been on a midwife-led unit. The consultant-led unit was a busy place dealing with much more problematic deliveries, none of which Gemma had experienced before. She was involved in the case of a teenager presenting to labour ward, in labour, from community. There was some concern over the well-being of the baby and on arrival it was confirmed he had died. Gemma wanted to reflect on this, but found it difficult to do so. Instead, she writes below a post she made on the university's Blackboard site, asking for a boost from her fellow student midwives and some perspective on being a student midwife. (1 reference) (Author)

20110627-2*

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20110524-7

A review of student midwives' conduct and support through supervision. Patterson D, Moorhead C (2011), MIDIRS Midwifery Digest vol 21, no 2, June 2011, pp 152-156

To assist and provide clarity to students the NMC, the UK regulator for nursing and midwifery, has published guidance setting out certain standards of personal and professional conduct expected of nursing and midwifery students in order for them to become fit for practice (NMC 2009a). It is envisaged that interaction between the student and the supervisor of midwives (SoM), at this early stage of the student's career, will provide a clear understanding of the role of supervision and the support which is available in midwifery practice (Steele 2009). The aim of this paper is to discuss the attributes of attaining a professional qualification, what is expected for the professional behaviour of student midwives and to explore the direct and indirect relationship between supervision of midwives, midwifery education and student midwives. (46 references) (Author)

20110524-6

Scattering leaves and making soup: a midwifery student's experience of formulating a personal philosophy. Wixted D (2011), MIDIRS Midwifery Digest vol 21, no 2, June 2011, pp 149-151

Bournemouth University has developed a comprehensive academic caseloading unit that supports students in preparing for the student caseloading model of care (NMC 2009) initiative. Prior to beginning caseloading practice the author, a second year student midwife, must successfully complete the final assignment of this unit to consolidate her learning. This assignment must demonstrate her understanding of safe practice and knowledge of the processes involved in planning, prioritising and evaluating women-centred care that is underpinned by a personal philosophy of care (Rawnsion et al 2008). This article reflects on the author's experiences of developing and articulating her personal philosophy of care, and discusses the challenges she encountered in trying to express it in a meaningful way that captured her core beliefs and values. It also explores how this journey can provide a powerful learning platform for future practice. (8 references) (Author)

20110504-60

When things get personal..... Foubister N (2011), Midwives no 3, 2011, p 33

As a student, Natalie Foubister discovered that the NMC Code wasn't always easy to follow in practice. Now a newly qualified midwife, she offers advice on how to remain professional in testing situations. (Author)

20110503-50*

Learning preferences of first year nursing and midwifery students: Utilising VARK. James S, D'Amore A, Thomas T (2011), Nurse Education Today vol 31, no 4, 2011, pp 417-423

The diversity of first year students is increasing with new schemes promoting access to higher education courses. It is important to assess the learning styles of students in order to cater for their differing learning needs. The aim of this study was to profile first year nursing/midwifery students at two campuses of Australian Catholic University, to investigate their learning preferences and the effect demographic background has on these preferences. We designed a survey to collect demographic data and incorporated the VARK (visual, aural, read-write and kinaesthetic) questionnaire to investigate the students' preferred learning modes. The kinaesthetic score of our students was the highest (7.34 +_ 2.67), significantly differing from the other three modes (p < 0.001). Demographic factors such as gender and age group did not influence mean scores of each sensory modality. The predominant preference was quadmodal utilising all four learning styles. The distribution of students preferring to learn by unimodal, bimodal, trimodal and quadmodal styles varied between demographic groupings. The rural students had significantly higher visual and kinaesthetic scores compared to their metropolitan counterparts. Students attending the rural campus had

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higher visual and read-write scores. Visual and aural scores were significantly lower for students from non-English speaking backgrounds. These findings have significant teaching and research implications. (Author)

20110408-10

Ideals, expectations and reality: challenges for student midwives. Barkley A (2011), British Journal of Midwifery vol 19, no 4, April 2011, pp 259-264

This article looks at the way in which student midwives begin their training with certain expectations and ideals about the normality of the birth process. It considers how these expectations can be challenged by the reality of the hospital/medical environment, and considers whether students adapt their expectations accordingly. This article considers the challenges of promoting and practising normal birth against an increasingly medical backdrop, and examines culture within midwifery and in particular how this can affect student midwives. (44 references) (Author)

20110316-3

Students as valuable but vulnerable participants in research: getting the balance right using a feminist approach and focus group interviews. Anderson G (2011), Evidence Based Midwifery vol 9, no 1, March 2011, pp 30-34

Background: This approach to data collection was undertaken as part of a Master of Science in midwifery study exploring student midwives' perception of the meaning of 'normal birth'. Ethical consideration indicated students may be a vulnerable group. Guided by a feminist approach and using focus group interviews aimed to balance the valuable contribution of students as a resource with their potential vulnerability. Aim: To explore the challenges and value of using students as research participants. Outline of the main content: As a resource it has been suggested that students are an underused group particularly in relation to their own experience and preferences. Although described as a valuable resource students might also be identified as vulnerable due to a possible lack of autonomy. Students may be described as vulnerable because the researcher holds multiple roles such as a midwife who is both a researcher and a lecturer. Although students are considered as autonomous adults capable and competent of providing informed consent, their competence to refuse may be impaired. Although the definitions of focus groups vary there is general consensus with regard to the distinguishing features which are also incorporated within a feminist framework. Focus groups are particularly naturalistic when members know each other and apart from the supportive nature this creates it may offer a relatively safe environment in which to share their experiences and also address any power imbalance between the participant(s) and the researcher. Interactive analysis provides additional support of the findings and improves rigour. Conclusions: Using focus groups with vulnerable groups such as students balances power relations. Careful planning creates an environment in which students feel safe to share their experienced and reduces their potential vulnerability. Thus the potential of students as valuable resources of information could be more widely used in healthcare research. (30 references) (Author)

20110221-9

Development of a research study exploring women's experiences of being part of a student midwife's caseload: what I want to do and why. Rawnsion S (2011), MIDIRS Midwifery Digest vol 21, no 1, March 2011, pp 15-18

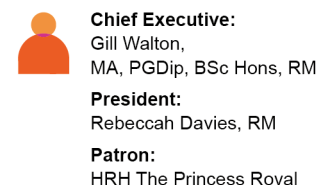
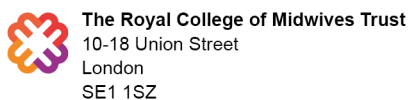
Through my educational role at Bournemouth University (BU), I have developed a particular interest in student midwife caseloading, and wanted to share with you my thoughts around developing research themes surrounding women's experiences of being part of a student midwife's caseload. This research forms the basis for my PhD work, which I hope to complete within the next three years. Currently I'm in the process of seeking ethical support for this work and hope to begin data collection later this year. In this article I discuss my rationale for developing this study and reflect on some of the challenges ahead. (53 references) (Author)

20110221-15

So you want to be a midwife?. McAdam J (2011), MIDIRS Midwifery Digest vol 21, no 1, March 2011, pp 41-42

Short piece by Jenny McAdam reflecting on her career choices and, following her voluntary work on a transitional ward at St Michael's Hospital in Bristol, her decision to apply to train as a midwife. (ABS)

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20110128-3

Getting the best out of student placements. Hughes M (2011), Nursing Times vol 107, no 2, 18 January 2011, pp 18-19

Negative feedback from student nurses about intermediate care placements led to a focus group being set up to look at why they were viewed negatively and what could be done to improve students' experiences. This article discusses the outcome of the focus group, and gives guidance on how to ensure students get the most out of intermediate care placements. (5 references) (Author)

20110120-22

Midwifery taster course for prospective midwifery students. McIntyre HR (2011), British Journal of Midwifery vol 19, no 1, January 2011, pp 57-60

The midwifery taster course was first run in 2006 following numerous requests from local students to the acute trusts for work experience and concern about attrition from the 3-year pre-registration midwifery programme. A focus group with a local comprehensive school inspired the creation of a 5.5-day course incorporating theoretical academic and clinical exposure. The latter includes acute and community settings. This article details the course outline and qualitative findings from evaluations relating to the students' experiences. Students commented on the role and scope of midwifery practice, professionalism and team work, comparisons between acute and community midwifery and the student-mentor relationship. Of the four students from this cohort who applied to the 3-year programme, all are successfully continuing their studies. (14 references) (Author)

20110119-62

'Miracles come every day'. Noor L (2011), Practising Midwife vol 14, no 1, January 2011, p 46

The author, a third-year midwifery student, explains how honoured she feels to be able to be a part of the whole birth experience, recognising the role her mentors have had in supporting and encouraging her progress through the course. (MB)

20101015-15

A student's quest for the 'Holy Grail'. Milner-Smith L (2010), Practising Midwife vol 13, no 9, October 2010, p 46

Lisa Milner-Smith found the true meaning of normal birth in a family environment. (Author)

20101014-22

Going to university: hints and tips for new midwifery students. Lee K, Busby A (2010), British Journal of Midwifery vol 18, no 10, October 2010, pp 669-671

This article is aimed at new undergraduate students of midwifery. Health-care programmes are a mix of theory and practice and therefore have unique challenges. Hints and tips are provided here on living away from home managing finances, practice and study. (4 references) (Author)

20100910-55

Caseloading: students solve their own problems using action learning. Lee K, Porteous C (2010), British Journal of Midwifery vol 18, no 9, September 2010, pp 603-605

Caseloading is a relatively new aspect of midwifery education and as such it is useful to share information with students at other institutions. This article discusses how students identify their own concerns related to specific NHS Trust placement sites and how they are solved using action learning. This article makes reference to several articles that have been written on the topic of caseloading. (13 references) (Author)

20100902-60

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20100826-12*

LAOS: Rebirth of the midwife. (2010), IRIN 25 August 2010

Reports that dozens of women in Laos are training to become midwives in order to try to address the high maternal and infant mortality rates there. It is the first time in Laos that midwifery training has been conducted for 23 years and was inspired by the success of a similar programme in Sri Lanka in the 80s. (JR)

Full URL: <http://www.irinnews.org/Report.aspx?ReportId=90284>

20100825-36*#

A pocket guide for student midwives. 2nd edition. McKay-Moffat, Lee P (2010), Chichester: Wiley-Blackwell 2010. 335 pages

A Pocket guide for Student Midwives, 2nd edition is an accessible, portable book offering student midwives everything they need to grasp the key elements of midwifery language, knowledge and skills. The new edition of this useful 'aide memoire' is structured in two parts. The first includes relevant terms, abbreviations and definitions. The second part is a quick A-Z reference guide to common conditions, procedures, emergency situations, and supporting information enhanced by visual material to aid comprehension of normality and anomalies. The innovative action flow charts enables rapid access to information that logically guides the reader through procedures in potentially life threatening situations, in both home and hospital settings. A Pocket guide for Student Midwives, 2nd edition is essential reading for the new non-nurse student midwife, the experienced nurse entering the midwifery profession, and senior student midwives alike. A handy portable 'survival guide' for student midwives: Fully updated to include the latest NMC directives, legislation, and policies: Includes flow charts, illustrations, and activities (Publisher)

20100702-41

Exploring the learning experiences of final-year midwifery students. Rogers K (2010), British Journal of Midwifery vol 18, no 7, July 2010, pp 457-463

The student perspective is extremely important when evaluating the success of educational programmes; however, the student voice is muted in evaluations of interprofessional education. Consequently, this study aimed to explore pre-qualification midwifery students' experiences and views of studying within an interprofessional learning context. Heideggerian, hermeneutic, phenomenology was the research approach and a purposive sample of eight final-year pre-qualification midwifery students from one UK university was used. Significantly, the narratives illuminated that interprofessional learning assisted students in the process of dual socialization, enabling them to become both midwifery practitioners and members of the interprofessional team. Inherent difficulties in this process are revealed and explored. Importantly, students valued a humanistic approach to learning and the ability to share dialogues with diverse health professional students. The research concludes with recommendations for local practice. (48 references) (Author)

20100701-54

Infection control in clinical placements: experiences of nursing and midwifery students. Ward DJ (2010), Journal of Advanced Nursing vol 66, no 7, July 2010, pp 1533-1542

Aim. This paper is a report of a study of the experiences of nursing and midwifery students in relation to infection control in their clinical placements and how these affect their learning. **Background.** Compliance with infection control precautions has been found to be low in many areas. Reasons for non-compliance include factors relevant to nursing and midwifery students, such as lack of knowledge and lack of a positive role model. However, there is little in the literature about how students experience infection control in placements and how this affects their own practice. **Methods.** Semi-structured interviews were undertaken in 2009 with 40 nursing and midwifery students. Analysis of transcripts was by Framework analysis. **Findings.** Students identified practices that they had observed and benchmarked these against what they had been taught at university and what was demonstrated by staff perceived as

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positive role models. Observing inappropriate practice affected student practice both positively and negatively. Students were reluctant to report poor practice due to fear of failing placements and not wanting to be identified negatively by staff. Students believed that practice supported by theory was important to provide them with a rationale for their activities and to support any complaints that they had. Conclusion. Poor practice in clinical placements can have a negative impact on student learning and practice and may therefore have implications for the practice of future nurses and midwives. In order to maintain patient safety, there needs to be more support for students who wish to identify poor practice. (47 references) (Author)

20100611-9

Getting that important first job. Lee K, Whitmore J (2010), British Journal of Midwifery vol 18, no 6, June 2010, p 395

This is the first in a series of articles focusing on getting that important first job as a midwife. This article looks at the basics of constructing a curriculum vitae (CV), completing an application form and gives some top tips to help your stand out from the rest. (Author)

20100520-7

Involving supervisors of midwives in student education. Dunkley-Bent J, Jones D (2010), British Journal of Midwifery vol 18, no 5, May 2010, pp 308-314

As the complexities and challenges of practice and expectations of the midwifery role requirements increase then so will the support that midwives require from supervisors of midwives as part of their professional relationship. It is well documented in the literature that the role of mentor can bring with it a particular series of challenges, one of the most difficult of these being when a midwife is faced with the situation of having to fail a student in practice. The Nursing and Midwifery Council clearly states that robust processes should be in place to ensure that where there are issues of concern with regard to a student's practice, these should be dealt with swiftly. Early and continued involvement of supervisors of midwives can make a significant contribution to these processes and the form these contributions can take merits further discussion. It is suggested that positive role modelling of supervisors of midwives will benefit students by helping them develop a positive concept of accountability. As leaders of the profession it is argued that supervisors of midwives must create opportunities to engage strategically in the development and delivery of midwifery education. (22 references) (Author)

20100409-40*

Support for student nurses urged as 25% dropping out. Financial problems and job prospects blamed for many failing to graduate. Candlish J (2010), Press and Journal 8 April 2010

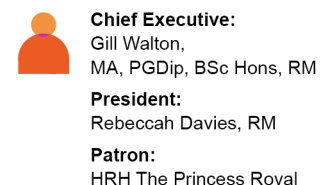
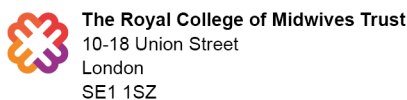
Reports that Rhona Grant, a Labour MSP, has called on the Scottish Government to provide more support for student nurses and midwives to address the issues that have led to many of them leaving their courses before they are qualified; these include financial difficulties, problems with childcare, poor experiences of clinical placements and poor job prospects. (JSM)

20100312-9*

New midwifery students' views of their future role. Pollard K (2008), Midwives August/September 2008

Midwifery is an ever-changing profession, whose public image may be at variance with the reality of the role (Harrison, 2005). It cannot be assumed that individuals entering midwifery share a common understanding about their future occupation. Different approaches and priorities have resulted in midwives practising in very different ways, and with differing philosophies of care. Midwives continue to struggle for professional recognition, and many newly-qualified midwives leave midwifery because they cannot practise as they wish to. This suggests a mismatch between entrants' perceptions of midwifery and the reality of the role. During a larger study to explore students' attitudes to collaborative learning and working, a cohort of students entering a three-year direct-entry midwifery programme in an English university answered two open-ended survey questions. The questions concerned their reasons for becoming midwives and their perceptions about the public view of midwifery. A total of 43 students

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(95.6% of the cohort) completed the survey. Data were analysed thematically. Respondents wished to support childbearing women and their families, and considered midwives primarily as NHS professionals. Many students appeared to be expecting to gain social privileges associated with being a 'professional', for example, respect and status within the community. Some students referred to women as 'patients'; there was little awareness demonstrated concerning issues of women's choice and control. Many respondents appeared to accept medicalised birth as the norm, and there was little indication that any students might work outside the NHS in the future. Given midwives' ongoing struggles for professional recognition, the perceived threat to normal birth in our society, and the difficulties that many midwives experience working inside the NHS, these attitudes may impact on students' future career options and the promotion of normal birth. More research is needed to discover whether these findings constitute an isolated pattern or a wider social trend. [This is just a summary. Full article available online at <http://www.rcm.org.uk/midwives/in-depth-papers>] (25 references) (Author)

20100218-50

Beyond the boundaries. My experiences of an elective placement with a specialist midwife for vulnerable women.

MacIntosh K (2010), MIDIRS Midwifery Digest vol 20, no 1, March 2010, pp 117-120

Katy McIntosh describes her experiences of the care offered by a specialist service working with women who have problems associated with domestic violence and/or substance abuse. (2 references) (JR)

20100114-92

Remember what it's all about! Engmann M (2010), Practising Midwife vol 13, no 1, January 2010, p 46

Presents the author's experience of attending an unplanned home birth, as a student midwife. (JSM)

20100112-117

What I am learning. Self care as a student midwife. Amani J (2009), MANA (Midwives Alliance of North America) News vol 27, no 4, December 2009, p 33

Very brief look at personal experience and feelings of a student midwife including her 9 tips for self care. (AEP)

20100105-4

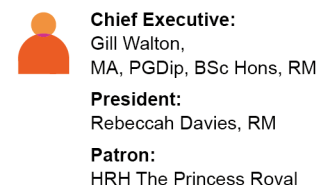
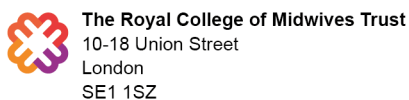
'At the Moment Midwifery is My Life and My Family Are My Hobby': Third Year Student Midwives' Reflections on Their Experiences of Juggling Study and Family Life. Robinson D, Kamo R, Wylie J (2009), Birthspirit Midwifery Journal no 4, November 2009, pp 9-15

To date, there has been no research exploring student midwives' experiences of undertaking a direct entry midwifery programme within New Zealand. However, research into women's experiences of undertaking other tertiary education has revealed that women may be confronted with gender specific challenges. This article reports the findings of a study conducted in 2006 that used a feminist phenomenological approach to identify the practical and emotional challenges six student midwives experienced over their three years of tertiary education. Three key themes were identified: transition; guilt and sacrifice; and gendered responsibility. The student midwives found the programme challenged them practically and, to a greater degree, emotionally. All students identified having undergone significant personal change. Students experienced differing degrees of guilt, associated with sacrifices they and the people close to them had made, and struggled with their sense of gendered responsibility. The findings raise questions about the level and type of support required when undertaking a direct entry midwifery degree programme, and we suggest that an increase in practical support may help alleviate emotional stress, and thus improve student midwives' experiences on their journey through midwifery education. (8 references) (Author)

20091207-110

Reporting behaviours of nursing students who have experienced verbal abuse. Ferns T, Meerabeau E (2009), Journal of Advanced Nursing vol 65, no 12, December 2009, pp 2678-2688

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AIM: This paper is a report of a study exploring the reporting behaviours of nursing students who had experienced verbal abuse while gaining clinical experience. **BACKGROUND:** Under-reporting of incidents of verbal abuse has been identified internationally as a limitation leading to incomplete data collection when researching aggression in healthcare facilities. This can call into question conclusions, recommendations and policy initiatives based on the research. **METHOD:** Questionnaires were distributed in 2005 to a convenience sample of 156 third year nursing students from one preregistration nursing programme in England. A total of 114 questionnaires were returned, giving a response rate of 73.0%. Fifty-one students (44.7%) reported verbal abuse and all of these gave details of the behaviours concerned. **RESULTS:** Thirty-two students (62.7% of those reporting verbal abuse) stated that they had reported the incident and 19 (37.3%) of respondents stated that they had not. Only four incidents resulted in formal documentation. The most frequent feelings reported by respondents were embarrassment and feeling sorry for the abuser. **CONCLUSION:** Failure to document experiences of verbal abuse formally was prevalent and reporting practices were variable. Both higher education institutions and healthcare providers should consider establishing process for formal reporting and documenting of incidents of verbal abuse during nurse education, and students should have access to formal support services. (60 references) (Author)

20091110-77

Student midwives' experiences of hospital-based postnatal care. Kroll D, Ahmed S, Lyne M (2009), British Journal of Midwifery vol 17, no 11, November 2009, pp 690, 692, 694-697

This mixed method study explored whether concerns raised by student midwives about the quality of their mentorship and teaching in the postnatal ward environment enabled them to meet the Nursing and Midwifery Council standards of proficiency for postnatal care, to qualify as a midwife. Some concerns were supported and it was found that effective, supportive teaching and mentorship was affected by many factors owing to the physical environment and the competing demands placed on mentors. The primary findings were that students felt less valued on the wards and better supported in the community. There was recognition that some skills could only be learnt in the hospital setting. There was no significant difference between the needs of students on long or shortened pre-registration programmes. Students will therefore continue to need teaching and mentorship in the hospital setting and trusts have an obligation to actively support this commitment. (19 references) (Author)

20091110-34

Knitting it all together: breastfeeding education. Hewett A, Henshaw AM (2009), Practising Midwife vol 12, no 10, November 2009, pp 30, 32

An innovative project is part of a university's ambition to achieve Baby Friendly status. (3 references) (Author)

20091008-74

A Southern diploma versus a Northern degree. Powell K, Edwards E (2009), Midwives October/November 2009, pp 48-49


Students Kim Powell and Emma Edwards describe their experiences of diploma and degree courses to the RCM's Jacque Gerrard. (Author)

20091001-49


The midwife who is in education. Paxton E (2009), In: Mander R and Fleming V editors. Becoming a midwife. London: Routledge 2009, pp 81-94

Explores the midwifery student experience through the eyes of both midwife educator and student, including the background to midwifery education in the UK, the role of the midwifery educator and the midwife as admissions tutor. Considers the methods of student-centred education such as inquiry-based learning, the reflective practitioner, elective placements, e-learning and distance education, and outlines the future of midwifery education. (14 references) (TC)

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20090922-25

Going for the dream: the ups and downs of application. O'Sullivan C (2009), Practising Midwife vol 12, no 8, September 2009, pp 28-29

Claire O'Sullivan describes the tough challenges she overcame in order to fulfil her ambition of becoming a midwife.

(Author)

20090922-118

Midwifery training in the 1950s - Part 1 CMB. Kargar I (2009), Midwifery Matters no 122, Autumn 2009, p 17

A midwife describes her experience of midwifery training at the East End Maternity Hospital in London, UK, during the early 1950s. Details the antenatal care offered at that time, and her experiences of working on the labour and postnatal wards. (TC)

20090707-6

Introduction of e-learning into the pre-registration midwifery curriculum. Clarke EJ (2009), British Journal of Midwifery vol 17, no 7, July 2009, pp 432-437

This article identifies the introduction of interprofessional e-learning into the pre-registration midwifery curriculum. It provides a personal reflection of the experiences of using e-delivery of the interprofessional teaching and learning pathway at Coventry university. E-learning is not new, yet, there has been a lack of information (research, literature and evidence about e-learning and information technology and pre-registration midwifery education. This article provides insights into the modern midwifery curriculum, contextualizing the need for interprofessional education and identifying some of the challenges to the midwifery profession, educators and students inherent in this method of delivery. The article also suggests some solutions to the challenges and offers insight into possible technologies for delivery of the midwifery curriculum in the future. (45 references) (Author)

20090707-4

Student midwives' views on story sharing: the BUMP study. Leamon J, Wilkins C, Brown S, et al (2009), British Journal of Midwifery vol 17, no 7, July 2009, pp 426-431

Reflective practice has been an integral part of preregistration preparation for several decades. To date the focus of this development has been associated with enhancement of cognitive skills. This article reports on the qualitative exploration of story sharing which formed part of a larger action research study undertaken by the Bournemouth University Midwifery Programme (BUMP) group. Analysis of the data revealed four themes: selecting, preparing and timetabling the sharing of stories; sharing experiences; listening and being listened to; and issues related to the tutors and the structuring of the learning. Students reported that learning via the preparation and sharing of their stories supported their development as midwives by enhancing their intrapersonal communication skills, creativity and problem solving. (32 references) (Author)

20090619-97

Perceptions of motherhood: The effect of experience and knowledge on midwifery students. Fraser DM, Hughes AJ (2009), Midwifery vol 25, no 3 June 2009, pp 307-316

OBJECTIVE: to explore the factors that influence student midwives' constructs of childbearing, before and during their undergraduate midwifery programme. **DESIGN:** a naturalistic, qualitative study. **SETTING:** a university in the East Midlands, UK. **PARTICIPANTS:** 58 women registered on a 3-year midwifery education programme. **MEASUREMENTS:** focus groups were conducted at programme commencement and at 9-12 monthly intervals with two cohorts of midwifery students who were separated into groups of mothers and non-mothers (32 focus groups in total). This paper draws on data from the nine focus groups held at the start of the students' programme. **FINDINGS:** the main themes that emerged from the data were in relation to image during pregnancy, expectations/experiences of childbirth and parenting. In particular, students believed that pregnancy and childbirth should be special. They suggested that a lack of knowledge about sexuality and choice options affected women's ability to be in control.

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Although normality was the students' expectation of childbirth, they also assumed that hospital birth was the norm. They were unsure whether the baby's father was the best birth partner. Their mothers were suggested as likely to be more supportive, but there was lack of agreement regarding whether they were the best parenting role models. Students also said that there was a lack of positive images of breast feeding. The overall motivation to become midwives was 'to make a difference'. **CONCLUSIONS:** students need to be facilitated early in their programme to explore their belief systems and constructs of childbearing critically so that they are equipped to support parents to have a positive experience, whether childbirth is normal or complex, and so that they can cope with any dissonance between their own expectations and the uncertainties and realities of practice. (22 references) (Author)

20090616-62

Bursary? What bursary?. Thomas S (2009), Midwifery Matters no 121, Summer 2009, pp 13-14

A student midwife discusses the availability of NHS bursaries for degree level midwifery programmes and outlines the restrictions that apply, leading many students to receive no financial support from these bursaries. Outlines other sources of financial support open to student midwives on degree programmes, but also highlights the difficulties in accessing these if you have been refused a bursary. (CR)

20090513-112*

The clinical learning environment and recruitment. Report of a joint working party. Royal College of Obstetricians and Gynaecologists, Royal College of Midwives (2008), London: Royal College of Obstetricians and Gynaecologists January 2008. 24 pages

This joint report from the Royal College of Obstetricians & Gynaecologists (RCOG) and the Royal College of Midwives (RCM) recommends strategies for improving the clinical environment for healthcare students within the UK. Using several undergraduate student surveys, the report reviews the experiences of medical and midwifery students on clinical placements and identifies the key issues which may act as barriers to a positive learning experience. [The full text version of this report can be accessed online at <http://www.rcog.org.uk/files/rcog-corp/uploaded-files/WPRClinicalLearning2008.pdf>] (28 references) (TC)

20090423-30

What? No midwifery society?. Bowen S (2009), Midwives April/May 2009, p 48

When Greenwich University's third-year student Shakera Bowen discovered there was no midwifery society when she began her course, she decided to set one up. This is her advice on the process. (Author)

20090408-26

Training, what training?. Pallett S (2009), Birthspirit Midwifery Journal no 1, February 2009, p 55

A student midwife in New Zealand reflects on her experiences of education and learning, concluding that woman-centred care, informed choice and trust are the most important issues for future midwives. (TC)

20090312-38

NMC set to consult students. (2009), Practising Midwife vol 12, no 3, March 2009, p 14


Brief news item reporting that the Nursing and Midwifery Council is consulting with students for the first time as it reviews its guidance on personal and professional conduct. (TC)

20090310-12


Midwifery research internships: the future?. Docherty A, Leon RL, Kennedy R (2009), British Journal of Midwifery vol 17, no 3, March 2009, pp 186-187

Three student midwives share their experiences as student interns at the University of Central Lancashire. (3)

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20090209-58

'You're too young to be a midwife'. Cooke H (2009), Practising Midwife vol 12, no 2, February 2009, pp 28-29

Helen Cooke is no longer bothered by comments about her lack of years, and is looking forward to qualifying as a midwife just 15 days after she turns 21. (Author)

20090120-79

Midwifery: A Filipina perspective. Prendergast K (2008), Midwifery Today no 88, Winter 2008, pp 58-59

A student midwife from the US describes her experience of working as an intern at Mercy Maternity Center in Davao, Philippines and presents the transcript of an interview that she conducted with a midwife and teacher at the clinic. (CR)

20090120-52

Staff - student relationships and their impact on nursing students' belongingness and learning. Levett-Jones T, Lathlean JH, Higgins I, et al (2009), Journal of Advanced Nursing vol 65, no 2, February 2009, pp 316-324

Aim. This paper is a report of selected findings from a study exploring the relationship between belongingness and placement experiences of preregistration nursing students. **Background.** Staff-student relationships are an important influence on students' experiences of belongingness and their clinical learning. The need to belong is universal and pervasive, exerting a powerful influence on thought processes, emotions, behaviour, health and happiness. People deprived of belongingness are more likely to experience diminished self-esteem, increased stress and anxiety, depression and a decrease in general well-being. Nursing students' motivation and capacity to learn, self-concept, confidence, the extent to which they are willing to question or conform to poor practice and their future career decisions are influenced by the extent to which they experience belongingness. **Method.** During 2006, 18 third year students from two Australian universities and one United Kingdom university participated in in-depth semi-structured interviews. Data were analysed thematically. **Findings.** Participants described placement experiences spanning a continuum from those promoting a high degree of belongingness to those provoking intense feelings of alienation. Staff-student relationships (including receptiveness, inclusion/exclusion, legitimization of the student role, recognition and appreciation, challenge and support) were the most important influence on students' sense of belonging and learning. Similarities between sites were remarkable, despite the differences in healthcare and higher education systems. **Conclusion.** Staff-student relationships are key to students' experience of belongingness. Understanding the types of interactions and behaviours that facilitate or impede students' belongingness and learning are essential to the creation of positive clinical experiences. (34 references) (Author)

20090106-50

Home birth: an eye-opener. Perkins L (2009), Practising Midwife vol 12, no 1, January 2009, pp 29-30

Student midwife Laura Perkins describes how attending her first home birth opened her eyes to the benefits of the midwifery model of care. (7 references) (Author)

20090106-4

Being a personal preceptor for nursing students: Registered Nurses' experiences before and after introduction of a preceptor model. Hallin K, Danielson E (2009), Journal of Advanced Nursing vol 65, no 1, January 2009, pp 161-174

Aim. This paper is a report of a study to compare Registered Nurses' experiences of acting as personal preceptors for nursing students in the year 2000 with the year 2006 and explores relationships between preceptors' experiences and personal/clinical characteristics. **Background.** Preceptoring is experienced as stressful and challenging. How successful preceptors are in this role depends largely on the support they receive. Knowledge about preceptors' experiences over time and in relation to a preceptor model is limited. **Method.** Data were collected by questionnaire in 2000 (n =

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113) and 2006 (n = 109) with preceptor groups in a hospital in Sweden before and after introduction of a preceptor model. Data were analysed with descriptive and correlational statistics using parametric and non-parametric methods. Findings. Statistically significant improvements were noted in preceptors' experiences between 2000 and 2006. Statistically significantly more preceptors in 2006 reported that they felt prepared for their role and felt support from teachers, colleagues, chief nurses and enrolled nurses. Least improvement was seen in relation to the questionnaire items workload, constructive feedback and support in linking research results to practice. A strong positive relationship existed between preceptors' experiences of the preceptor role and the level of interest in preceptoring. Conclusion. The preceptor model offers a way to support and facilitate preceptors and to develop co-operation between university and hospital. Future research should focus on students' experiences, experiences of first-time preceptors, head preceptors and teachers from a longitudinal perspective. (45 references) (Author)

20081209-17

A rollercoaster ride: life as a student midwife. Gorman H (2008), Practising Midwife vol 11, no 11, December 2008, p 41
Helen Gorman describes white-knuckle moments of both fear and joy on the 'big dipper' of midwifery training, and looks forward to the next ride. (Author)

20081203-26

Bachelor of Midwifery students' experiences of achieving competencies: the role of the midwife preceptor. Licqurish S, Seibold C (2008), Midwifery vol 24, no 4, December 2008, pp 480-489

OBJECTIVES: to explore and describe Bachelor of Midwifery students' learning experiences, specifically the role of the midwifery preceptor in learning and development of competency, from the students' perspective. The findings reported are taken from a wider investigation into Bachelor of Midwifery student's achievement of competency.

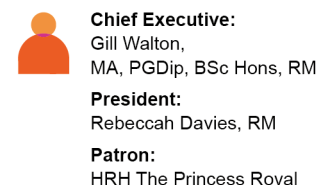
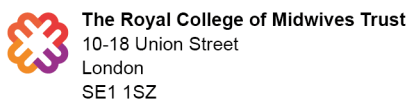
DESIGN: grounded theory methodology using in-depth interviews for data collection. **SETTING:** school of nursing and midwifery of one university, and associated clinical teaching hospitals in Victoria, Australia. **PARTICIPANTS:** eight Bachelor of Midwifery students completing their final clinical placement. **FINDINGS:** data analysis in the broader study identified the categories of: hands-on practice; reflecting on practice; building confidence; gaining knowledge; working with midwives; and constructing a sense of self as a midwife. This paper focuses on one category 'working with midwives', which encompasses the therapeutic, interpersonal and clinical characteristics of the preceptor and their impact on student learning. Generally speaking, students identified midwife preceptors as helpful and unhelpful, and students indicated that they prefer to work with a caring midwife preceptor, who enjoys teaching, answers questions fairly and is philosophically similar. Students also felt that they benefited from opportunities for responsibility for care under supportive supervision, hands-on learning and debriefing. Midwife preceptors described as unhelpful were poor role models, did not allow the space for 'hands-on' practice or 'took over', were generally unsupportive and operated in a hierarchical system within the clinical agencies. **KEY CONCLUSIONS AND IMPLICATIONS FOR PRACTICE:** a positive midwife preceptor-student relationship is an integral part of successful student midwife learning, and preceptors with helpful qualities enhance learning. Hands-on learning was emphasised as the most beneficial learning experience and students sought opportunities to work with midwives who imbued the philosophy they admired rather than becoming desensitised or socialised into a midwifery culture that was at odds with the course's philosophy. These findings are potentially useful to inform midwives and agencies teaching student midwives about preceptor behaviours helpful for student midwife learning. (34 references) (Author)

20081119-14

'Mixed messages': midwives' experiences of managing emotion. Hunter B (2009), In: Hunter B, Deery R eds. Emotions in midwifery and reproduction. Basingstoke: Palgrave Macmillan 2009, pp 175-191

Explores how student and novice midwives learn to manage their emotions at work and describes the various approaches for managing emotions, such as affective neutrality, affective awareness, impression management, and the use of self-protective barriers such as withdrawal and detachment. Seeking support from colleagues is noted as a key way for midwives to manage emotion. (32 references) (TC)

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20081014-94*

An exploration of the factors that cause stress to student midwives in the clinical setting. Jones C, Wylie L (2008), Midwives October/November 2008, p 30

This paper provides an account of some factors that cause stress to students. Focus group interviews were undertaken using volunteers from a convenience sample of all second- and third-year student midwives from two universities. The discussion surrounds issues encountered by students in the clinical setting. Lack of supernumerary status, mentorship, bullying and intimidation, and limited application of evidence to practice are identified by students as stressors. This stage of the study supports previous research, which identifies ongoing problems with student support, the theory/practice interface and mentor attitudes. (Author) (This is just a summary. Full article available online at www.rcm.org.uk/magazines/papers)

20081008-64

Students: do something about poor mentoring. Hassell V (2008), Practising Midwife vol 11, no 9, October 2008, p 6

Open letter appealing to student midwives to speak out about qualified midwives not providing good quality mentoring. (TM)

20081007-8

Student caseloading: embedding the concept within education. Rawnson S, Fry J, Lewis P (2008), British Journal of Midwifery vol 16, no 10, October 2008, pp 636, 638-641

This final article in a series of three papers examines how the initiative of student midwife caseloading at Bournemouth University (BU) forms a central strand of our undergraduate pre-registration midwifery curriculum. It offers a model for other midwifery education providers to consider and possibly replicate. Following the initial success of our student caseloading scheme, steps were taken to embed it at the strategic and operational levels within our wider educational provision. It now forms an essential and integral part of the theoretical and practice elements of the pre-registration midwifery programme, underpinning the philosophy of approach, facilitation of learning and assessment of competence throughout the curriculum. This strand has been an evolutionary process that has developed from a purely practice-based initiative to a comprehensive educational component throughout all three years of midwifery education. Its development can be traced from the beginning of student caseloading in 1997 to BU's current and contemporary educational provision. (12 references) (Author)

20081007-64

Transition to midwife. Davis J (2008), Midwifery Today no 87, Autumn 2008, pp 47, 69


Jude Davis discusses her transition into midwifery following the birth of her first baby. (13 references) (TM)

20080901-8


The efficacy of midwifery role models. Bluff R, Holloway I (2008), Midwifery vol 24, no 3, September 2008, pp 301-309

AIM: to explore the influence of midwifery role models on the role that student midwives learn. DESIGN: a qualitative approach using specifically grounded theory, was adopted. Data were collected by means of unstructured tape-recorded interviews, and analysed using the constant comparative method. SETTING: South of England. PARTICIPANTS: 20 student midwives undertaking either an 18-month pre-registration shortened programme or a 3-4-year long programme were included in the study, along with 17 midwives practising in a variety of settings. FINDINGS: students learn the role of midwife in a changing culture, in which some midwives practise autonomously and others continue to rely on doctors to make their decisions. Students emulate the role of the midwife with whom they work. This suggests that all midwives are effective role models. Midwives who demonstrate the role of handmaiden to the doctor are inappropriate role models. They perpetuate a culture of midwifery that neither meets professional expectations nor the needs of women. Because they have power, students emulate these role models when in their presence. Midwives who practise autonomously are appropriate and influential role models. From these

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role models, students learn how to become autonomous practitioners. They emulate the practice of these role models because they want to, and intimate that they will continue to do so when their name is entered on the Nursing and Midwifery Council Professional Register. IMPLICATIONS: if learning inappropriate behaviours are to be avoided, attention needs to be paid to role modelling. (49 references) (Author)

20080813-3

Student midwife caseloading - a new approach to midwifery education. Lewis P, Fry J, Rawson S (2008), British Journal of Midwifery vol 16, no 8, August 2008, pp 499-502

Student midwife caseloading was pioneered by Bournemouth University (BU) in 1996. Following a successful pilot study and further refinements of the process, it was introduced as a core element of our undergraduate pre-registration midwifery programmes in 1999. This is the first of a series of three articles in which the ideas, initiative and success of establishing this groundbreaking project are considered. The founding of the concept, the process and practicalities of setting up the scheme and the lessons learnt are documented and discussed in this primary article. The importance of effective planning, positive collaboration and effective communication have underpinned and facilitated this seminal change from traditional student placements. The second and third articles will explore how student caseloading works in practice and is sustained to form a fundamental educational strand throughout the BU pre-registration midwifery curriculum; enhancing accountability and autonomy of our students and future practitioners of midwifery. (18 references) (Author)

20080812-45

Why I'm a midwife. Shaffer C (2008), Midwifery Today no 86, Summer 2008, p 35

A student midwife's award-winning essay about why she decided to enter the world of midwifery. (MB)

20080714-8

An elective in Zambia. Common L (2008), Midwifery Matters no 116, Spring 2008, pp 3-5

A student midwife recounts her experience of a midwifery placement in Zambia, and her work with a HIV/AIDS charity, SAPEP. (2 references) (TM)

20080714-24

Reflections on journeying off the map and beyond the conveyer belt: the story of a newly qualified midwife. Ford H (2008), Midwifery Matters no 117, Summer 2008, pp 12-15

Helen Ford describes her experiences on the road to becoming a newly qualified midwife, beginning with her decision to leave medical school, to undertaking an intense Advanced Diploma in Midwifery Studies course, and fulfilling her wish to become a caseloading midwife. (16 references) (TM)

20080714-12

Midwifery in Ethiopia - an elective experience. Greco A (2008), Midwifery Matters no 116, Spring 2008, pp 12-14

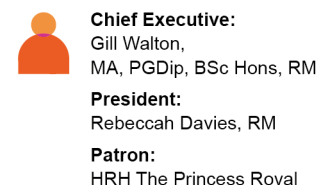
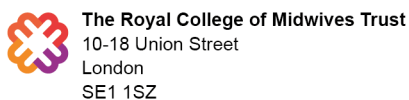
A student midwife gives an overview of her experience on placement at Jimma Hospital in Ethiopia, where the neonatal and maternal mortality rates are 51 per 1000 live births and 850 per 100,000 respectively, compared with the UK's 4 per 1000 and 11 per 100,000 live births. In 2004 life expectancy at birth in Ethiopia was 49 males, 51 females. One in 14 women died from pregnancy related causes. HIV is pandemic, and there is a high incidence of uterine rupture. (8 references) (TM)

20080709-90

Good on ya, Trish! Marsh W (2008), Practising Midwife vol 11, no 7, July/August 2008, pp 29-30

Wendy Marsh pays tribute to her former tutor, Tricia Anderson, for making her realise that informed consent should

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be at the heart of good midwifery care. (1 references) (Author)

20080709-15

Student life on the ward. Anon (2007), Midwifery Matters no 113, Summer 2007, p 11

A student midwife describes her experience of working on a combined ante- and post-natal ward and highlights the pressures that she faces due to staff shortages and a lack of beds. (CR)

20080709-10

A wintry day at the breech. Horler A (2007), Midwifery Matters no 115, Winter 2007, p 19

Angela Horler shares her experiences of 'A Day at the Breech', a study day discussing breech delivery in labour. (TM)

20080612-45*

Nursing is a rewarding dose of reality. McCormack S (2008), Independent 12 June 2008

Reports on the high drop-out rate of students on nursing courses. States that of the students expected to complete nursing degrees or diplomas in 2006, 26% had dropped out before the end of their course. Blames the high figure on students not being fully prepared for the work which can impact on them, both physically and emotionally, and suggests that many people form opinions of the profession through watching television dramas such as Casualty. Describes how the Institute of Nursing and Midwifery at Middlesex University is taking steps to avoid this situation in future by overhauling its recruitment process. (JSM)

20080604-8

Student morale at all-time low. (2008), Practising Midwife vol 11, no 6, June 2008, p 13

News item reporting that student midwives' morale is declining due to difficulties finding work and financial problems. (MB)

20080520-68

We've always done it that way: part 3. Wickham S (2008), Practising Midwife vol 11, no 5, May 2008, p 63

This final article on the topic of improving practice explores the area considered one of the trickiest issues in midwifery: how practice can be improved by looking at whether habits and methods of practice are beneficial. Students are likely to challenge midwives' methods because they have learnt something different from a lecture, book, tutor or mentor. The author considers that there is no shame in realising that something is done because that is the way it always has been done; the key is to see if there is a way to adopt a better habit in time for the next generation of students to challenge. (TM)

20080409-30

Students at large (3). Go west: midwifery in Canada. Partridge C, Jones K, McEvilly C (2008), Practising Midwife vol 11, no 4, April 2008, pp 34, 36

In the third article on Edge Hill University's national and international placement option, Catherine Partridge and Kerry Jones, with support from Catherine McEvilly describe their 'unforgettable experience' of midwifery in Ontario, Canada. (1 reference) (Author)

20080409-23

Woman-centred care: a reflective poem. Flockton J (2008), Practising Midwife vol 11, no 4, April 2008, p 19

Jenny Flockton pledges to chat more informally with women rather than focusing purely on delivering information when communicating through an interpreter. (1 reference) (Author)

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20080408-18

'Drop the bags and catch the baby': the night I realized I'm a midwife. Ford H (2008), British Journal of Midwifery vol 16, no 4, April 2008, p 255

A student midwife describes her first experience of a home birth and the feeling of being 'reborn' as a midwife. (CB)

20080221-38

Maternity services: ever-decreasing circles?. Jenkinson M (2008), Midwives February/March 2008, p 38

A Leeds university student shares her experience of helping to chair the RCM's 17th annual student midwife conference in London. (CR)

20080221-30

Lessons from an elective. (2008), Midwives February/March 2008, pp 26-27

Two student midwives from the UK reflect on their experiences of an elective placement in Bangkok, Thailand. They describe the intrapartum care observed and the services provided by antenatal and postnatal clinics and highlight the differences in maternity care in the UK and Thailand. (CR)

20080212-53

Student midwives' views of self-assessment. Wilkins C, Leamon J, Rawnsdon S, et al (2008), British Journal of Midwifery vol 16, no 2, February 2008, pp 88-93

Student self-assessment is a valuable skill which can enhance effective learning and facilitate continuing professional development. This article reports on a qualitative exploration of self-assessment, which formed part of a larger action research project into a pre-registration midwifery programme. Analysis of the data identified our key themes: understanding; preparation; value; and ability. Underpinning these themes was the students' desire for greater clarity of understanding of the self-assessment process, together with a desire for more preparation for the process through the provision of a supportive tutorial framework. This should include opportunities to discuss, develop and practice assessment criteria and receive relevant feedback on self-evaluations. The findings provide a rationale for recommending the development of a structured approach and identified pathway following the progress of self-assessment skill in all units, aimed at facilitating a more comprehensive engagement with the self-assessment process by both students and tutors and enhancing understanding of its value to future learning. (30 references)
(Author)

20080102-33

Why are student midwives afraid to question practice?. Henderson R (2008), British Journal of Midwifery vol 16, no 1, January 2008, p 43

Uses example of personal experience to discuss why student midwives become increasingly reluctant to ask questions during training. It also highlights the problems of finding a job, suggesting that questioning practice might improve job prospects as well as quality of practice. (2 references) (CB)

20071204-1

Women's experiences of a Follow Through Journey Program with Bachelor of Midwifery students. Rolls C, McGuinness B (2007), Women and Birth: Journal of the Australian College of Midwives vol 20, no 4, December 2007, pp 149-152

The purpose of this study was to explore the experiences of women involved with Bachelor of Midwifery students enrolled at Australian Catholic University (ACU), Victoria in a Follow Through Journey Program. The study incorporated an exploratory descriptive design utilising semi-structured interviews. Seven women participated in the study. Data analysis identified four major themes. These are as follows: women and students in partnership; the student was for me; making a difference, and the system. Women were very satisfied with the Bachelor of Midwifery student Follow

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Through Journey Program because the outcome for them was an empowering pregnancy, birth and early parenting experience. (13 references) (Author)

20071127-24*

Starting out: a student reflects on her midwifery placement. (2007), Nursing Standard vol 22, no 9, 2007, p 26

No abstract available.

20071003-2

The transmission of values specific to midwifery and their integration by student midwives. Laforest M, Vincent D (2007), Canadian Journal of Midwifery Research and Practice vol 6, no 2, Summer 2007, pp 18-26

Quebec midwives adhere to a set of values viewed as essential. These values set midwives apart from other obstetrics professionals and play an important role in the formation of their professional identity. This article explores whether these values are transmitted to student midwives. To achieve our research objectives, we presented 21 student midwives with scenarios where a client's behaviour corresponds only more or less to midwifery values (as defined by the regroupement Les sages-femmes du Quebec). Student responses were analyzed according to their level of correspondence with these values. The results show that regardless of the scenario, first-year students are most likely to form negative attitudes about the behaviour submitted to their attention and, contrary to their more advanced sisters, they base interventions with a client less on the need to refrain from judgment. Starting with the second year, the students' evaluations of behaviour tend to be neutral. The difference observed between the first-year cohort and the others leads us to believe that the start of the mentoring stage is the pivotal moment of training. (4 references) (Author)

20071001-4

'As a student I hated the constant criticism of my training by staff'. Henderson I (2007), Nursing Times vol 103, no 39, 25 September 2007, p 12

As the government prepares to overhaul pre-registration training, recent graduate Isobel Henderson says that students need support from qualified staff - regardless of the structure of their training. (Author)

20070912-45

Who appreciates student midwives?. Modasia D (2007), British Journal of Midwifery vol 15, no 9, September 2007, p 578

A personal reflection on the role of student midwives within the midwifery team which highlights that the presence of a student midwife can enhance the experience of a labouring woman.

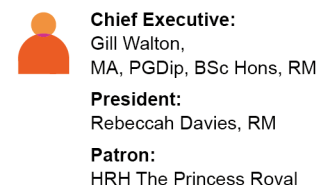
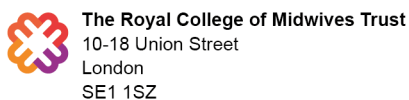
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20070810-85

Empowerment of nursing students in the United Kingdom and Japan: a cross-cultural study. Bradbury-Jones C, Irvine F, Sambrook S (2007), Journal of Advanced Nursing vol 59, no 4, August 2007, pp 379-387

Aim. This paper is a report of a study to explore the phenomenon of empowerment cross-culturally by comparing the situations in which nursing students from the United Kingdom and Japan experienced empowerment and disempowerment in clinical practice. **Background.** Empowerment has been the focus of many studies, but most focus on the experience of Registered Nurses and few have explored the phenomenon cross-culturally. **Method.** This was a cross-cultural, comparative study using the critical incident technique. Anonymous written data were collected from nursing students in Japan and United Kingdom between November 2005 and January 2006. Japanese data were translated and back-translated. Analysis of the transcripts revealed three themes: Learning in Practice, Team Membership, Power. **Findings.** Nursing students in these countries are exposed to different educational and clinical environments, but their experiences of empowerment and disempowerment are similar. For both, learning in practice, team membership and power are associated with either empowerment or disempowerment; depending on

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the context. United Kingdom students are aware of the importance of acting as patient advocates, although they cannot always find the voice to perform this. Japanese students however, appear to be unaware of the concept of advocacy. Conclusion. Student nurse empowerment may transcend cultural differences, and learning in practice, team membership and power may be important for the empowerment of nursing students globally. Further cross-cultural exploration is required into the association between advocacy and empowerment. (50 references) (Author)

20070810-84

The meaning of empowerment for nursing students: a critical incident study. Bradbury-Jones C, Sambrook S, Irvine F (2007), *Journal of Advanced Nursing* vol 59, no 4, August 2007, pp 342-351

Aim. This paper is a report of a study to explore the meaning of empowerment for nursing students in relation to their clinical practice experiences. **Background.** Empowerment and power are well-researched areas of nursing practice, particularly in relation to Registered Nurses. Furthermore, several studies have considered the experiences of nursing students in terms of nursing culture and socialization. However, few researchers have focused specifically on nursing student empowerment. **Method.** The critical incident technique was used and anonymous data were collected between November 2005 and January 2006. One hundred and nine written critical incidents were provided by 66 nursing students relating to empowering and disempowering experiences in clinical practice. The data were content analysed. **Findings.** Nursing students experience both empowerment and disempowerment in clinical placements, centring on three issues: learning in practice, team membership and power. Continuity of placement, the presence of a mentor and time underpinned empowering experiences whereas their absence had a disempowering effect. **Conclusion.** The consequences of nursing student empowerment are high self-esteem, motivation for learning and positive regard for placement. Supportive mentors play a pivotal role in the empowerment of nursing students and it is essential for the nursing profession that they are supported to undertake their mentorship role. (52 references) (Author)

20070726-20

Do it MY way! Midwifery students' perceptions of negative clinical experiences and negative characteristics and practices of clinical preceptors. Hunter LP, Diegmann E, Dyer JM, et al (2007), *Canadian Journal of Midwifery Research and Practice* vol 6, no 1, Spring 2007, pp 19-30

The purpose of this paper was to describe the perceptions of midwifery students concerning negative clinical experiences and ineffective role modeling received from clinical preceptors. Students (N = 145) from accredited midwifery schools in the United States and Puerto Rico voluntarily completed a qualitative descriptive survey from a URL website. Descriptive statistics identified demographics and clinical setting characteristics. pen-ended questions gathered qualitative data about preceptor behaviours that were detrimental to student learning in the clinical setting. Content analysis of the narrative responses provided major themes that identified negative clinical preceptor characteristics and behaviours and negative clinical experiences from the student perspective. Six areas contributed to negative experiences with preceptors from the students' perspective. These included the number of assigned preceptors; the teaching style of the preceptor; the life stress of the preceptor; lack of preceptor knowledge; and a harsh clinical environment. The most difficult aspect of negative preceptors was the insistence for the students to 'do it MY way'. Without effective preceptors much of midwifery's accumulated knowledge will be lost. By identifying negative clinical preceptor practices, improvements can be made to assist the preceptor and student in the process of learning. The negative practices represent areas where more research and interventions are needed. (32 references) (Author)

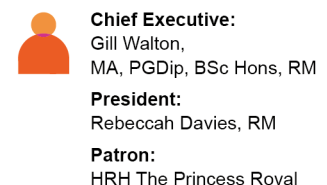
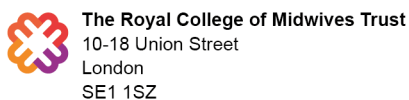
20070725-15

The challenges and rewards of life as an apprentice. Bartley C (2007), *Midwifery Today* no 82, Summer 2007, pp 26, 66-67

The author shares her experience of training as an apprentice midwife, as well as being a full-time mother. (MB)

20070706-38

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Exploring autonomy in education: preparing student midwives. Baird K (2007), British Journal of Midwifery vol 15, no 7, July 2007, pp 400-405

The following article aims to describe the findings from a piece of research which examined whether a sample of senior midwifery students, close to registration, believed that their pre-registration midwifery education had prepared, empowered and enabled them to be autonomous practitioners upon qualification. Most of the participants believed that their midwifery education had in the most part prepared them to be qualified midwives, but it had failed to equip them for professional autonomy. They believed that the concept and realization of midwifery autonomy had not been explicit enough in their educational programme. Any perceived barriers which the students felt inhibited qualified midwives from practising with professional autonomy will also be discussed, as many of the participants interviewed considered that they had only witnessed midwifery autonomy in midwifery-led birthing units and that it was almost invisible in obstetric led units. They considered that the medicalization of childbirth had prevented most of their midwifery mentors practising autonomous midwifery. (24 references) (Author)

20070622-38*

Should colleges be allowed to reject applicants who are disabled?. (2007), Nursing Standard vol 21, no 37, 2007, p 26
No abstract available.

20070622-15*

Survey of student nurses and midwives: smoking and alcohol use. Watson H, Whyte R, Schartau E, et al (2007), British Journal of Nursing vol 15, no 22, 14 December-10 January 2007, pp 1212-1216

This article presents findings from a survey of 186 first year nursing and midwifery students that relate to their smoking and alcohol consumption. Of the students sampled, 28% were cigarette smokers. This is higher than the smoking rate of 25% for the adult population in the UK. The majority of the students who smoked said that they would like to stop smoking. Most of the students (86.5%) reported having drunk alcohol on at least one occasion during the previous week, with 26.5% having had a drink on three or four days. The amount consumed over the week ranged from no drinks to 90, with the mean being 13.72. Worryingly, 74% had exceeded the daily benchmarks for low-risk drinking on at least one occasion during the week for which consumption was reported, and 55% were drinking at binge levels. The findings raise concerns for the future health of many of our students and for their roles as health promoters. (Author)

20070608-34

From nurse to student midwife: do they have the advantage?. Spence N (2007), British Journal of Midwifery vol 15, no 6, June 2007, p 352

The author describes her experience of training to be a midwife after working for seven years as a senior staff nurse in cardiothoracic medicine. (SB)

20070516-10

Nursing students' perceptions of learning in the clinical setting of the Dedicated Education Unit. Ransie K, Grealish L (2007), Journal of Advanced Nursing vol 58, no 2, April 2007, pp 171-179

AIM: This paper reports a study to explore nursing students' experience of learning in the clinical setting of a Dedicated Education Unit using a communities of practice framework. BACKGROUND: The Bachelor of Nursing curriculum at the University of Canberra is clinically focused, recognizing the importance of learning to be a nurse in and from practice. A communities of practice framework underpins the philosophy of the Dedicated Education Unit model of clinical practicum. METHOD: In this exploratory qualitative study, a convenience sample of 25 second and third year nursing students participated in focus group discussions, conducted in 2004, to share their views of learning in the Dedicated Education Unit, a newly established model of clinical education. FINDINGS: Three major themes were identified: acceptance, learning and reciprocity, and accountability. Acceptance of students by clinicians assisted students to engage in nursing work. Students acknowledged the importance of peer learning in sharing experiences,

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reinforcing knowledge and enhancing confidence. Students accepted responsibility for their work and they valued this responsibility, but some questioned whether participation in all aspects of work constituted a learning opportunity. CONCLUSION: Engagement and participation in the clinical workplace are valuable for nursing students. Strategies to support learning in the workplace can be shared with students and clinicians. Further research to test the theoretical premises of the communities of practice framework in clinical nursing education is required. (112 references) (Author)

20070501-2

Dilemma. Davison N (2007), Nursing Times vol 103, no 15, 10 April 2007, p 9

Answers a reader's concerns about the time taken to write an assignment. (Author)

20070426-24

Midwifery students' enrolment reasons and evaluations of the first Bachelor of Midwifery programme in Jordan.

Abushaikh L (2006), Midwifery vol 22, no 4, December 2006, pp 323-329

OBJECTIVE: to explore reasons for enrolment in the first bachelor of midwifery programme in Jordan, and to describe midwifery students' evaluations of the programme. DESIGN: a cross-sectional survey design. SETTING: The Faculty of Nursing at Jordan University of Science and Technology, Irbid, Jordan. PARTICIPANTS: 16 diploma-prepared midwifery students enrolled in the 2-year bachelor-completion programme. MEASUREMENTS AND FINDINGS: an open-ended question explored students' reasons for enrolling in the midwifery programme. For programme evaluation, a 13-item Midwifery Programme Evaluation Questionnaire (MPEQ) was developed and used. Total score ranged from 39-61, with a mean of 51.2 (SD=6.7). CONCLUSION: midwifery students reported five reasons for enrolling in the midwifery programme, which was favourably evaluated. IMPLICATIONS FOR PRACTICE: encouragement and sustainability of student enrolment in the JUST Bachelor of Midwifery programme are recommended to improve midwifery education and enhance midwifery as a profession. (17 references) (Author)

20070419-16

Should student midwives be allocated to maternity units with high caesarean rates?. Various (2007), RCM Midwives vol 10, no 4, April 2007, p 190

Provides a summary of responses to a poll that posed the question of whether student midwives should spend their training time in units with high rates of caesarean section. (MB)

20070411-7

Campaign for Normal Birth: students' stories. Fraser D (2007), RCM Midwives vol 10, no 3, March 2007, p 113

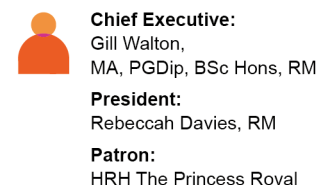
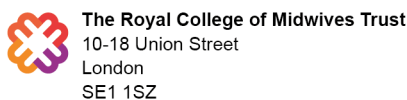
Professor of Midwifery and head of the academic division of midwifery at Nottingham University and member of the steering committee for the Campaign for Normal Birth Diane Fraser details some of the aspects of mentoring from the point of view of students. (1 reference) (Author)

20070302-7

Valuing of altruism and honesty in nursing students: a two-decade replication study. Johnson M, Haigh C, Yates-Bolton N (2007), Journal of Advanced Nursing vol 57, no 4, February 2007, pp 366-374

AIM: This paper reports a study investigating changes in the self-reported values of nursing students over the period 1983-2005 in the light of changes in student demography. BACKGROUND: Nurses' values have been studied by both qualitative and survey methods over half a century. Generally idealism and altruism are said to wane as a result of professional socialisation, whilst honesty has been rarely examined. METHOD: Building on an instrument designed by William Scott, further items were developed which addressed value orientations in a nursing context. Using a Likert scale and demographic items, a 1983 survey of three schools of nursing in England was repeated with a comparable population of students in 2005. FINDINGS: Student valuing of altruism and honesty has changed in important ways in

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the intervening decades. Nursing students are now generally less altruistic ($P = 0.01$) but value honesty with patients a great deal more ($P = 0.01$) than their counterparts in 1983. CONCLUSION: The current situation, with older students having more domestic responsibilities and some students needing to have extra jobs besides their nursing course, seems to have led them to adopt a pragmatic approach. However, there are encouraging changes in the valuing of honesty with patients, which reflect in part students' increased maturity and changed social attitudes to healthcare professional paternalism. (33 references) (Author)

20070219-3

Just fifteen minutes. Wookey R (2007), MIDIRS Midwifery Digest vol 17, no 1, March 2007, pp 15-16

The following account is a reflection on a visit to an HIV testing clinic within the Genito-Urinary Medicine department. The visit was undertaken to gain a greater perspective of the public health issues related to sexual health screening as part of the course experience of a student midwife from Bournemouth University. (4 references) (Author)

20070206-10

Improved student allowances. (2007), Practising Midwife vol 10, no 2, February 2007, p 11

News item reporting that student midwives' basic allowance is to be increased and that those who qualify to do so will receive a new parents' learning allowance. (MB)

20070108-54

Are student midwives adequately prepared for practice in the 21st century?. (2007), RCM Midwives vol 10, no 1, January 2007, p 46

Presents the views of a cross-section of midwives on how well undergraduate programmes have prepared student midwives for the reality of professional practice. (CR)

20070108-53

Steering the future of midwifery. Ratnaik D (2007), RCM Midwives vol 10, no 1, January 2007, pp 36-37

This year's RCM student midwives conference was packed with delegates from across the UK. Danny Ratnaik was among those in Leeds for the event, and reports on the powerful arguments presented for the midwives of tomorrow. (Author)

20061214-26

Asking for permission to observe can be intrusive. Penwarden AS (2006), Nursing Times vol 102, no 48, 28 November 2006, p 13

The author, a nursing student, reflects on the unease she felt while attending a caesarean section without the permission of the woman giving birth. (MB)

20061025-16

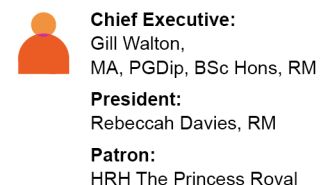
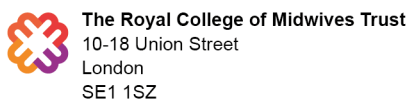
Being a student midwife. Horler A (2006), Midwifery Matters no 110, Autumn 2006, pp 9-10

The author, a student midwife explains how, despite negativity from colleagues and other students, she succeeded in her battle to inspire normal birth in a very large obstetric unit and arranged a one day course entitled 'A day at the breech' for students. Her persistence in offering women home births has apparently culminated in similar discussions with women among other community midwives. (MB)

20061025-15

Not just another number. Miles H (2006), Midwifery Matters no 110, Autumn 2006, p 8

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The author, a student midwife, reflects on a birth she attended where she and the midwife who accompanied her relied on physical signs of labour progress rather than internal examination. (MB)

20061024-99

Struggling in the dark. Vanessa (2006), Midwifery Matters no 109, Summer 2006, p 20

The author, a student midwife, tells of her difficulties juggling her studies, family life and finances, with little or no help from the government. (MB)

20061009-58

Student midwives' views of the objective structured clinical examination. Rennie AM, Main M (2006), British Journal of Midwifery vol 14, no 10, October 2006, p 602-607

Educational researchers have established beyond doubt that assessment greatly influences learning. However, the assessment of practical skills is complex and presents difficulties. Research in other disciplines has shown that the objective structured clinical examination (OSCE) is an effective evaluation tool to assess practical skills. The creation of a clinical skills laboratory within the educational setting, that simulates clinical reality, can enable experiential learning to occur. Most OSCE research so far has been focused on medical and nursing students, not midwifery students. This work focuses on student midwives' views of the OSCE in order that future OSCE processes could be advanced. Three main themes to emerge from the data were: practicalities of running the OSCE, preparation for the OSCE assessment and the impact of assessors, volunteers and simulation on OSCE performance, all of which impacted on levels of anxiety for the student midwives. (29 reference) (Author)

20061002-36

Why women choose midwifery: a narrative analysis of motivations and understandings in a group of first-year student midwives. Williams J (2006), Evidence Based Midwifery vol 4, no 2, October 2006, pp 46-52

AIM: To explore the motivations and understandings of a group of new students in relation to their decisions to become midwives, and the level of congruence and/or discontinuity between their understandings and dominant public discourses of midwifery. METHOD: A series of individual interviews were conducted with a self-selecting group of 15 participants from an exclusively female first-year cohort of direct-entry student midwives at a local university. Narrative analysis was used to interpret participants' stories and to gain a deeper understanding of their motivations and influences. RESULTS: Four major themes were identified from the students' backgrounds that may be significant in relation to their motivations and understandings - a 'sense of inevitability' in choosing midwifery, that it was 'not nursing', wanting to 'make a difference' and an identification with clear constructs of midwifery practice. Some differences and similarities between midwifery and nursing students were found, as were fairly clear differences in relation to the students' backgrounds and their perceptions of midwifery. CONCLUSION: The findings overall indicate a growing identification with midwifery as a separate career. Moreover, the students with less conventional backgrounds appear to have a greater understanding of the narratives and counter-narratives that impact upon midwifery and a clearer notion of themselves as being able to make a difference to the profession in the future. (29 references) (Author)

20060929-40

2006 Annual Student Report. Dau K, Scott T (2006), Quickening vol 37, no 5, September 2006, pp 18-19

Student report presenting a series of recommendations in the areas of communication, professional issues, promotion of midwifery and preceptorship. (CR)

20060912-66

Student survival guide. McHarg L (2006), Nursing Times vol 102, no 37, 12 September 2006, pp 22-23

Student life isn't all plain sailing, but a good survival plan can work wonders. Final-year nursing student Lesley McHarg

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offers tips to help you stay afloat. (Author)

20060906-69

Students face NMC-style panels. Vere-Jones E (2006), Nursing Times vol 102, no 36, 5 September 2006, p 3

News item reporting on proposals to set up panels to investigate nursing students who are suffering from poor health or who have been accused of poor practice. (MB)

20060901-40

A special learning experience. Seaman S, Montgomery E (2006), Practising Midwife vol 9, no 8, September 2006, pp 32-33

SCBU placements are an invaluable part of a student's training. (Author)

20060720-11

School of authentic midwifery: a student's journey in finding a school. Summerfeldt J (2006), Midwifery Today no 78, Summer 2006, p 21

The author shares her experiences of midwifery education and her search to find an establishment that taught 'authentic' midwifery. (MB)

20060712-3

Challenging and inspiring: student winner gives her conference verdict. Sammons S (2006), RCM Midwives vol 9, no 7, July 2006, pp 272-273

Susan Sammons was this year's winner of the journal's student competition to attend the RCM annual conference. Here she describes her experience. (Author)

20060703-9

Work, worries and woes: all worthwhile as knowledge grows. Various (2006), Australian Midwifery News vol 6, no 2, Winter 2006, p 25

Students from Curtin University in Western Australia share their perspective of the challenges, pleasures, doubts and sheer hard work involved in the quest to become a midwife. (Author)

20060605-27

Pay dispute may prevent students from qualifying and taking up posts. (2006), Practising Midwife vol 9, no 6, June 2006, p 10

News item reporting that midwifery students may not be able to graduate this year due to pay disputes by two lecturers' unions. (MB)

20060522-2

Reflections of a student midwife on the CEMACH London Diabetes Conference. Seaman S (2006), MIDIRS Midwifery Digest vol 16, no 2, June 2006, p 278

A student midwife's view of the London Diabetes Conference run by CEMACH. Her overview of the presentations is followed by her impression of the experience from a student midwife's perspective. (1 references) (VDD)

20060510-78

Nursing and midwifery students' approaches to study and learning. Mansouri P, Soltani F, Rahemi S, et al (2006), Journal of Advanced Nursing vol 54, no 3, May 2006, pp 351-358

Aim. This paper reports an investigation of the approaches to study and learning of nursing and midwifery students at

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a school of nursing and midwifery in Iran. Background. Current knowledge suggests that students approach their studies in surface, deep or strategic manners. Students' approaches to study have an important impact on their academic success. Awareness of their approaches to study and factors that affect their choices is important for curriculum planners as well as nurse and midwife educators. Methods. A cross-sectional design was used with a convenience sample of nursing and midwifery students in all 3 years of study at one university in Iran. The validated Persian translation of Entwistle and Ramsden's Approaches and Study Skills Inventory was administered in a classroom context in 2003. Results. Sixty-four per cent (95% CI; 57-72%) of nursing and 63% (95%; CI 50-75%) of midwifery students adopted a deep approach. The use of a surface approach was negatively correlated to the stage of study for midwifery but not nursing students. There was also a statistically significant positive correlation between level of interest in the field of study and use of strategic approach for both nursing and midwifery students. Grade point average for the nursing students adopting the strategic approach was statistically significantly higher than for those adopting deep or surface approach. The grade point average for midwifery students adopting strategic approach was statistically significantly higher than that for those adopting deep approach, but not different from the grade point average of those adopting surface approach. Conclusion. Our findings suggest that adoption of strategic or deep approaches to learning was associated with better educational outcome, as indicated by higher grade point averages. Moreover, the findings emphasize the impact of students' interest in their field on their academic success. Therefore, the adoption of factors which foster deep or strategic approaches and activities which increase students' interest should lead to improved academic outcomes. (20 references) (Author)

20060411-55

The experiences of a first cohort of Bachelor of Midwifery students, Victoria, Australia. Seibold C (2005), Australian Midwifery News vol 18, no 3, November 2005, pp 9-16

This paper reports on a study the aim of which was to describe the expectations and experiences of a first cohort of students in a three-year Bachelor of Midwifery course, which commenced in Victoria in February 2002. Data were collected via focus group interviews at the commencement of each year, excerpts from the students' reflective journals, selective interviewing of some students and course evaluations at the end of each year of the course. Fourteen of the 20 students, predominantly mature age students, had preconceived ideas with regard to expectations of the course, some of which were met, while some adjustments needed to be made over time. At each year level, students were generally happy with the theoretical component of the course, while identifying some overlap in course content and the need for discrete subjects in areas such as pharmacology. While considering that, by the end of the course, they had achieved a beginning level of competence, the most contentious issue identified by the students was the practical experience, namely the organisation of the practical experience in the agencies, the quality of the experience, the number of follow through experiences and the extensive documentation required. (19 references) (Author)

20060407-62

Clinical experiences of students with dyslexia. Morris D, Turnbull P (2006), Journal of Advanced Nursing vol 54, no 2, April 2006, pp 238-247

Aim. This paper reports a study exploring the clinical experiences of student nurses with dyslexia and its potential influence on their practice. Background. Widened access to university education has meant an increase in the number of students with dyslexia. A limited number of studies have explored the academic experiences of dyslexic student nurses. However, nursing students in the United Kingdom spend 50% of their programme in practice settings, and there are no studies detailing their clinical experiences. Method. This qualitative exploratory study involved tape-recorded interviews with a convenience sample of 18 nursing students with a formal dyslexia diagnosis. Data were collected in 2003-2004 and were analysed using thematic analysis. Findings. Participants described a number of personalized approaches to managing their difficulties in practice. Whilst many of these may be useful to non-dyslexic students, descriptions of, for example, avoiding answering the telephone, were inappropriate. Some participants contended with discrimination and ridicule, often choosing not to disclose their disability. Less acute clinical environments appeared to provide more satisfying working experience, and this factor may be influential in shaping

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future career options. Participants valued more time and an undisturbed place to complete clinical documentation. Heightened self-awareness promoted patient safety as the major concern for study participants. Positive aspects of dyslexia were never raised or acknowledged by participants. Conclusion. The clinical setting provides a challenging environment for nursing students with dyslexia, who find personalized ways to manage their disability. A dyslexia diagnosis continues to carry a stigma that may result in non-disclosure, with implications for the level of support available. Greater awareness of the practice-specific needs of such students is required to ensure appropriate support and public safety. (43 references) (Author)

20060407-57

Enhancing support for nursing students in the clinical setting. Twentyman M (2006), Nursing Times vol 102, no 14, 4 April 2006, pp 35-37

Quality clinical placement experiences are essential for effective student learning. Key factors that can influence this experience are students not feeling welcome in the clinical setting and limited opportunities for them to engage in learning. From a review of the literature and of personal experiences, this paper presents some guidelines that can be introduced at local level without requiring additional resources in order to improve students' experiences. (23 references) (Author)

20060407-54

Court upholds maternity rights. Anon (2006), Nursing Times vol 102, no 14, 4 April 2006, p 4

Reports on a High Court ruling against the Department of Health for cutting student bursaries while the students in question were on maternity leave. (MB)

20060209-28

Midwifery in poetry - art and science?. Cronin R, Parry J (2006), MIDIRS Midwifery Digest vol 16, no 1, March 2006, pp 16-18

This article discusses our experience of enquiry-based learning as second year student midwives at Bournemouth University. In particular, it considers our most recent presentation completed in the form of poetry and how we feel this has contributed to our progression as student midwives, specifically by bringing together both the art and science of midwifery. (4 references) (Author)

20060115-40*

When it all goes wrong. How to cope with a bad placement. Anon (2005), Nursing Standard vol 19, no 39, 2005, p 72

No abstract available.

20051123-56

Looking towards the future: but starting now! Rawson S, Fry J, Buxton C, et al (2005), MIDIRS Midwifery Digest vol 15, no 4, suppl 2, December 2005, pp S19-S21

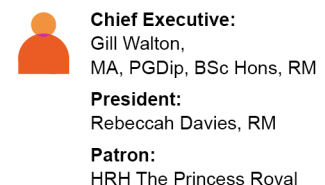
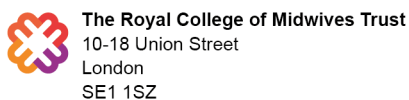
Bournemouth University have, in the last few years, instituted a student caseloading initiative. This workshop, run by two midwife teachers, a clinical mentor and one of the participating students, described how it was set up and how it has progressed, examining such issues as safety, mentoring and support. (3 references) (VDD)

20051122-48

The art of midwifery from a student's perspective. Clark H (2005), MIDIRS Midwifery Digest vol 15, no 4, December 2005, pp 468-469

Short piece about a student midwife's personal reflections on the art of midwifery drawing on her recent experiences as a student. (ABS)

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20051020-19*

An exploratory study of the concerns of mature access to nursing students and the coping strategies used to manage these adverse experiences. Steele R, Lauder W, Caperchione C, et al (2005), Nurse Education Today vol 25, no 7, October 2005, pp 573-581

The inter-connections between educational, family and social spheres of life are integral to the experiences and outcomes of mature student participation in education. This relationship highlights the need to understand the educational experience in the context of the life of the mature student. Mature nursing students have been shown to experience many difficulties during their course. These problems include childcare, relationship and financial difficulties. What is not well documented are the problems and coping strategies of future nursing students who are undertaking Access to Nursing courses and whether these mirror those found in mature nursing students. This small scale exploratory study investigated the course-related problems and coping strategies of mature students undertaking an access to nursing in a Further Education College. This study is one part of a larger programme of research investigating mature students in nursing. In-depth interviews were conducted on mature students and data were analysed using content analysis methods. Content analysis revealed particular concerns regarding the obstacles faced by mature nursing students. In particular the findings suggested that financial difficulties and re-entry into tertiary education were the prominent concerns for these individuals. The coping mechanisms identified to overcome these problems included; support networks, prioritising and organising, and positive expectations and attitudes for the future. Understanding how students cope with their difficulties will provide the building block for future intervention strategies designed to minimise problems and increase retention rates. Further longitudinal research is required on the long term and cumulative nature of stress and coping in this group from access to post-qualification. (Author)

20051013-13

Horizontal violence and students. Comisso C (2005), Australian Midwifery News vol 5, no 3, Spring 2005, pp 40-41

After three years of listening to student stories about the treatment they have received, mostly by midwives while on clinical placement, Cate Comisso brings the issue of 'horizontal violence', or 'vertical violence', back into the limelight to remind everyone that it is still happening and to call for an end to it. (Author)

20051013-12

It's 04.27 am and I'm about to become Rebecca Hart RM. Hart R (2005), Australian Midwifery News vol 5, no 3, Spring 2005, p 39

Recent BMid graduate Rebecca Hart relates her experience of the fear and excitement in making the transition to being a Registered Midwife. (Author)

20050916-45

The new breed of students. Lomas C (2005), Nursing Times vol 101, no 37, 13 September 2005, pp 24-25

A widening entry gate means that there is no longer any such thing as your 'average' nursing student. But what does this broad mix of age and experience mean for the profession and students. (Author)

20050916-44

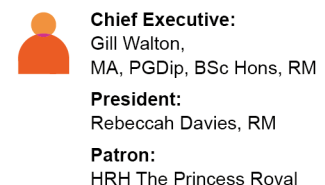
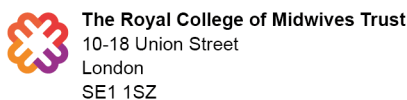
The student experience. Paton N (2005), Nursing Times vol 101, no 37, 13 September 2005, pp 20-22

Training as a nurse is never an easy option, but its rewards are unique and many. Nic Paton looks at the current challenges of preregistration education and how students, trusts, colleges and the government are rising to meet them. (Author)

20050916-43

Is student poverty jeopardising the future of nursing? Chatterjee M (2005), Nursing Times vol 101, no 37, 13 September

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Life as a student has always been touch but more trainee nurses than ever are finding themselves heavily in debt.

(Author)

20050912-31

Promote safe motherhood, students told. (2005), Practising Midwife vol 8, no 1, January 2005, p 9

Brief news item reporting that student midwives are being encouraged to use the skills they acquired from their training to help improve the health care of women and children in developing countries. (MB)

20050822-40

A guide for student midwives: how to get the most out of your course. Darra S (2005), MIDIRS Midwifery Digest vol 15, no 3, September 2005, pp 322-328

Based on a booklet given to new students at Swansea University, this article takes the new student through what will be expected of her during her training and where to seek help and resources. (26 references) (VDD)

20050718-21

Thoughts of a first year BMid student: midwife = with woman. Packer J (2005), Australian Midwifery News vol 5, no 2, Winter 2005, p 29

A student midwife describes attending her first birth and her increasing involvement in fighting for women to have the birth they want. (MB)

20050718-19

The final year is going too fast. Comisso C (2005), Australian Midwifery News vol 5, no 2, Winter 2005, p 26

A final year student shares her experience of studying at the Royal Women's Hospital, Melbourne. (MB)

20050712-2

Student midwives win landmark case. (2005), Practising Midwife vol 8, no 7, July/August 2005, p 6

Describes the case of three student midwives who have won an appeal after their bursary payments were cut when they took maternity leave. An employment appeal tribunal ruled that the government had been wrong to do this. (JSM)

20050712-13

Singing from the same hymn sheet?. (2005), Practising Midwife vol 8, no 7, July/August 2005, p 54

All students should receive a uniform training covering high-risk care as well as normal birth, writes one new midwife. (Author)

20050711-9

Student midwives: views of the direct-entry programme. Dike P (2005), RCM Midwives vol 8, no 7, July 2005, pp 314-317

Since the introduction of direct-entry programmes, a great deal of conflicting information has arisen regarding their effectiveness. Priscilla Dike presents the results of a survey that asked students who had completed such a course how well they considered it had prepared them for practice. (18 reference) (Author)

20050711-5

A student's perspective. Dean T (2005), RCM Midwives vol 8, no 7, July 2005, pp 298-299

RCM Midwives Journal's competition to win full delegate attendance at the RCM annual conference, paid for by the

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journal's publishers McMillan-Scott, was won by Tessa Dean. She reports on her experiences of the events that make up the 'midwifery club sandwich'. (1 reference) (Author)

20050711-43

Exploring interpersonal tensions and opportunities. Bloom J (2005), British Journal of Midwifery vol 13, no 7, July 2005, pp 461-463

Midwives are required to form relationships with their clients that are therapeutic and supportive, based on trust, respect and the appropriate use of power (NMC, 2002). This article points to the interpersonal tensions and opportunities students face in their relationships and explores management of the boundaries between therapy and education when emotions are stirred up in clinicians in response to their work. The education group has enormous potential, providing a stage for exploring the tensions and opportunities that women face. Problem-based learning can be used in midwifery education to examine these issues. (16 references) (Author)

20050711-11

Do today's midwifery students spend enough time in practice situations?. (2005), RCM Midwives vol 8, no 7, July 2005, p 322

Presents some of the views expressed by midwives polled on the subject. (MB)

20050701-43*

An exploration of student midwives' language to describe non-formal learning in professional practice. Finnerty G, Pope R (2005), Nurse Education Today vol 25, no 4, May 2005, pp 309-315

The essence of non-formal learning in midwifery practice has not been previously explored. This paper provides an in-depth analysis of the language of a sample of student midwives' descriptions of their practice learning in a range of clinical settings. The students submitted audio-diaries as part of a national study (Pope, R., Graham, L., Finnerty, G., Magnusson, C. 2003. An investigation of the preparation and assessment for midwifery practice within a range of settings. Project Report. University of Surrey). Participants detailed their learning activities and support obtained whilst working with their named mentors for approximately 10 days or shifts. The rich audio-diary data have been analysed using Discourse Analysis. A typology of non-formal learning (Eraut, M. 2000. Non-formal learning and implicit knowledge in professional work. British Journal of Educational Psychology 70, 113-136) has been used to provide a framework for the analysis. Non-formal learning is defined as any learning which does not take place within a formally organised learning programme (Eraut, M. 2000. Non-formal learning and implicit knowledge in professional work. British Journal of Educational Psychology 70, 113-136). Findings indicate that fear and ambiguity hindered students' learning. Recommendations include the protection of time by mentors within the clinical curriculum to guide and supervise students in both formal and non-formal elements of midwifery practice. This paper will explore the implications of the findings for practice-based education. (Author)

20050613-27

Midwifery practice: a wider agenda. Jacob S, Slessar J (2005), RCM Midwives vol 8, no 2, February 2005, pp 82-83

The 14th RCM annual conference for students brought together delegates and speakers from across the UK. Sue Jacob and Judy Slessar report on the day that also included the introduction of new campaigns and the chance for students to share opinions and experiences. (Author)

20050510-35

Midwifery practice in New Zealand: a student perspective. Bellis L, Lee W (2005), RCM Midwives vol 8, no 5, May 2005, pp 208-210

The option period of the midwifery course offers students the opportunity to travel and see how maternity services operate in other countries and cultures. Winners of the RCM student travel award in 2003, Lesley Bellis and Wendy Lee

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describe the time they spent in New Zealand. (5 references) (Author)

20050510-30

The first birth. Yusuf N (2005), RCM Midwives vol 8, no 5, May 2005, p 194

For a midwifery student, witnessing labour and birth for the first time is an educational experience and one that will never be forgotten. Naima Yusuf describes her feelings and what she was able to learn from the event. (Author)

20050411-38

Spreading some magic. Anderson T (2005), Practising Midwife vol 8, no 4, April 2005, p 17

Trainee midwives need to be inspired by teachers who remain excited by the magic of birth and who are living the experience. (1 reference) (Author)

20050329-30

EDD: September 2005. Kennard C (2005), Midwifery Matters no 104, Spring 2005, p 5

A student midwife shares her concerns about starting her new career. She feels she may be forced to practice in a way that goes against everything she has been taught and believes in, if she manages to get a job at all. (MB)

20050224-4

Report on RCM Annual Student Midwife Conference 1 December 2004. Wilson A (2005), MIDIRS Midwifery Digest vol 15, no 1, March 2005, p 49

This very favourable report, done by the new student member of MIDIRS editorial board, highlights the passion displayed by the speakers at this conference for their profession. Students were likely to have left this event with increased confidence in their future practice. (VDD)

20050224-3

So you wanted to be a midwife.... Jackman G (2005), MIDIRS Midwifery Digest vol 15, no 1, March 2005, pp 45-46

The author describes her experiences when, as a student, she was prevented from continuing her course because of her psoriasis despite there being no evidence that this condition was in any way dangerous to the women in her care. She is also critical of aspects of her training, particularly the clinical placements and wonders whether one reason for midwives leaving the profession is because of the authoritarian and hierarchical attitudes encountered along their way. (VDD)

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