

**BOOKLET FOR NURSE MIDWIFE EDUCATORS & NURSE MIDWIFE CLINICIANS ON
HOW TO IMPROVE THE TEACHING-LEARNING & WORKING
ENVIRONMENT FOR MALE NURSE MIDWIVES**



M.M CHINKHATA

**BOOKLET FOR NURSE MIDWIFE EDUCATORS & NURSE MIDWIFE
CLINICIANS ON HOW TO IMPROVE THE TEACHING-LEARNING & WORKING
ENVIRONMENT FOR MALE NURSE MIDWIVES**

**M.M. CHINKHATA (Dip N, BSc N Ed (UNIMA KCN), MSC MPH
(Curtin University of Technology)).**

2016

DEDICATION

This Booklet is dedicated to all nurse midwives, nurse midwife educators, nurse midwife clinicians, preceptors, clinical instructors and all those that contribute toward the teaching and learning of student nurse midwives in Malawi

ACKNOWLEDGEMENTS

The design of this booklet could not have been accomplished without the support of the following people:

Study participants whose contributions have enabled me to compile this booklet:

- Male student nurse midwives in selected nursing colleges in Malawi
- Qualified male nurse midwives working in the four central hospitals in Malawi
- Lecturers in selected nursing colleges

Dr Gayle Langley, for guiding me throughout the study. Her contributions and guidance are appreciated

Nursing Education Partnership Initiative (NEPI) for the financial sponsorship without which my studies could not have been possible.

Table of Contents

DEDICATION	i
ACKNOWLEDGEMENTS.....	ii
1.0 PREFACE	1
1.1 Outline of the booklet.....	2
2.0 SECTION A: THE MOTIVE TO BECOME A NURSE MIDWIFE	3
3.0 SECTION B: POSITIVE EXPERIENCES FACED.....	5
4.0 SECTION C: CHALLENGES FACED	6
5.0 SECTION D: RECOMMENDATIONS BY MALE STUDENT NURSE MIDWIVES	8
6.0 SECTION E: RECOMMENDATIONS BY NURSE EDUCATORS & CLINICIANS.....	10
7.0 REFERENCES	12

1.0 PREFACE

Have you ever reflected on your role as a nurse midwife or nurse midwife educator in teaching male student nurse midwives to acquire professional skills both in the class room and at the clinical area?

As a professional nurse midwife, are you being approached by student nurses to help them in some way to meet their learning goals?

This booklet could inform those who contribute to the teaching of student nurse midwives. Meyer and Niekerk, (2008) see that both nurse midwife educators and nurse midwife clinicians have a role in teaching student nurse midwives in the clinical area. The booklet contains information that can help nurse midwives and nurse lecturers to effectively assist student nurse midwives in the clinical area to become competent practitioners. The booklet has been designed following a mixed methods study entitled “Gender mainstreaming in nursing education: A study on the professional socialisation processes of undergraduate male students in Malawi.” The study aimed at exploring and describing the lived experiences of male student nurses regarding their professional socialisation process in nursing, formulate and validate socialisation materials. Qualified nurse midwives, male student nurses and nurse midwifery lecturers in Malawi from nursing colleges and hospitals in all the three geographical regions of Malawi participated in the study.

The study findings revealed that some undergraduate male nurse midwifery students do experience positive experiences in the profession while many experience challenges both in the classroom and at the clinical area during their education and beyond. Some of the students believe that many of those challenges can be prevented if their proposals are implemented by various stakeholders who contribute toward their performance during and after training.

This booklet highlights some of the recommendations the participants made during the study. It targets nurse midwife educators, nurse midwife clinicians and nurse managers. All these practitioners, as professional socialisation agents, have a role to play in helping students learn effectively both in the classroom and at the clinical area.

It is my hope that the reader will find this booklet useful in contributing toward the education of male student nurse midwives in our country.

1.1 Outline of the booklet

The booklet is divided into five sections.

Section A

This section contains information on what motivated most of the participants to join the nursing profession. It sheds some light on the various motives student nurses had and could be having for joining the profession. It is envisaged that irrespective of the motive for joining nursing, the aim is that one day one qualifies as a professional nurse midwife. Both the author and the reader of this booklet have the responsibility to help the students achieve their ambitions.

Section B

This section presents information on some of the positive experiences a majority of the male participants had in the profession.

Section C

This section outlines challenges that a majority of the male participants experience in the nursing profession.

Section D

This section contains recommendations made by male student nurse midwives who participated in the study. They expressed the hope that the recommendations made, when implemented, will help strengthen education of nurse midwifery students especially male student nurse midwives.

Section E

This section contains recommendations made by qualified nurses and lecturers who participated in the study. They hope the recommendations, when implemented, will help improve the education and retention of nurse midwives especially male nurse midwives.

2.0 SECTION A: THE MOTIVE TO BECOME A NURSE MIDWIFE

The study participants were those with a similar interest either as qualified nurse midwives or future nurse midwives. The cadre could be either that of a registered nurse or a nurse midwife technician. All had a motive for joining nursing. Most of the study participants indicated that they joined nursing so as to provide care to patients.

Nurse midwives share similar interests in that they all focus on providing patient/client care though at different levels and in different settings. Regardless of whether qualified or not, they all started as students at a nursing college and expected that those already qualified would guide them in the process of becoming nurse midwives. The process involves three people namely; the student nurse, the nurse midwife clinical practitioner and the nurse lecturer/educator. All three focus on how best to provide care to a patient. Both the nurse lecturer and the nurse midwife clinician have a role to help the student learn how to render care to the patient. There is, therefore, a need for collaboration to ensure that effective teaching and learning takes place (Meyer and Niekerk, 2008). Though there are some health professionals in the clinical area who contribute towards the education of student nurse midwives, the qualified nurse midwife is of paramount importance because the student nurse midwives practice under the cover of the nurse midwife's licence in order to acquire the appropriate skills, knowledge, attitudes and behaviour expected of a nurse midwife professional. In contrast, the qualified nurse midwife should derive satisfaction in contributing toward the development of a graduate. In the process, an individual would attain personal and professional development through knowledge and skill impartation. By taking an active role in contributing toward the training of neophyte nurses, the qualified nurse midwife ensures continued availability of professional nurses to all citizens.

Through the process of acquiring knowledge, skills and positive attitudes, the student would also be encouraged to see that he/she is being changed from a novice to an expert (Benner, 2001). If the teaching and learning process is conducted in a conducive environment, then students will either affirm their motivation or reflect on one's motive and change it for the better

There are various reasons that make a person join a profession. Irrespective of the motive, the goal is to become a qualified nurse midwife. As such, those already qualified can either help the students achieve their ambition of becoming qualified persons or compromise this undertaking.

The study revealed that most of the participants had similar reasons for joining nursing. The majority of the qualified and student nurse midwives cited the following reasons for joining nursing:

1. Compassion for the sick
2. Being inspired by how nurses cared for a relative when admitted to the hospital
3. Job security
4. Pursuing university education
5. Just to work in the hospital
6. Following footsteps of parents/relatives who once worked as nurses.
7. Fulfilling parents' or friends' desire

Some study participants said this;

*".. aah for me to join nursing it was out of my passion I had in nursing and not just someone telling me that you should join nursing; nobody can change my passion.." **Male student nurse, College 4, Respondent 4, Line 53.***

*"..my mother was going to hospital to deliver her baby and it happened that on the way, she was involved in a car accident but, after being taken to the hospital, the midwives were able to help her deliver .I was the baby. So as appreciation on behalf of my mother, I just felt I should be one of them (Nurse Midwives) in this profession; so that I can help others''. **Male student nurse College 4, Respondent 2, Line 45.***

*"..I joined the profession to help those who are in need. If we look in our country we have so many patients in the hospitals and the health workers have to overcome the situation. It's not easy. So I am adding to the numbers to help the majority of sick Malawians..." **Male student nurse, College 1, Respondent 1, Line 18.***

*"..I was never motivated I just joined....". **Male nurse 6, Line 13.***

The above quoted statements indicate that students may have different reasons for joining nursing. The qualified nurse midwife clinicians and nurse lecturers, as change agents (Lai, 2012), are there to aid the students to appreciate the important implications of choosing to become a nurse midwife. Through the use of these change agents, effective professional socialisation can be achieved, thereby encouraging retention and reducing attrition of all nurses, particularly male nurses (Stott, 2004).

3.0 SECTION B: POSITIVE EXPERIENCES FACED

Some male nurses tend to have memorable experiences in the profession. The study participants shared both positive and negative experiences. This section highlights positive experiences that the majority of male student nurses experienced.

- An individual tends to have a sense of achievement and job satisfaction upon successfully treating a patient.
- An individual tends to learn to be a critical thinker, courageous person and responsible for one's actions on a patient.
- An individual's dream of being a nurse becomes a reality.
- An individual is able to apply theory to practice in the clinical area.
- Work done is recognised through certification. While others receive awards for example a Merit Award.
- Relatively, there are more men being recruited in all nursing colleges unlike in the past.
- Some lecturers and qualified nurses support and encourage the male student nurses during training.

4.0 SECTION C: CHALLENGES FACED

Despite the positive experiences faced by some participants in the course of becoming a nurse midwife, the majority of the participants experienced challenges. The participants perceived that if most of the challenges they experienced were addressed, their education could improve for the better.

The following are some of the challenges the majority of both qualified and student male nurses face at the work place and during training as revealed in the study:

1. Perceptions that many lecturers and clinical practitioners favoured female students and nurse midwives.
2. Male nurses comprised a minority group in the profession.
3. Experiencing some discrimination by nurses, lecturers, other health cadres and the community, especially in rural areas.
4. The image of the nurse being promoted as female in the media.
5. A lack of male role models.
6. Perceived social isolation both in class and in the clinical area.
7. The use of feminine language in the clinical area such as “matron”, or sister’s office”.
8. Some patients’ special preference to be cared by female nurse midwives.

Some study participants said:

“.. I heard it said that even though a male nurse works hard, he doesn’t get good grades....”. **Male nurse 9, line 68.**

“...Yaah sometimes you find out that patients choose whom to assist them. Sometimes you can see that the patient may say”.. I don’t want a male nurse I want a female nurse to assist me..”. *“I can just give an example of Indians: you will not deliver the Indian woman if you are male, but if there is a female nurse midwife, she is the one to deliver them...”* **Male nurse 3, Line 72-3**

‘.. The issue of awards... they should be based on merit. Majority are offered to female nurses....’ **Male nurse 10, Line 46**

“..I think the most important thing is the lack of role models.”. **Female Lecture 1, Line 57**

“..I know of some lecturers also who say: “ I don’t like these male nurses” even when you go to the clinical area they would have that mentality that “.. I do not like these males, these males they do not perform well they are not for this particular profession” so it’s like it’s also us lecturers that if we have that particular mentality that I think I do not like males in this particular profession, maybe we may not know it but in one way or the other we can be doing something that would demotivate the male students. May be we need to accept that it is possible that males can also become nurse midwives...” **Female Lecture 4, line 32.**

There are various ways in which both nurse midwife clinicians and educators can assist students. One way is ensuring a supportive and conducive environment for learning (O'Lynn, 2013). Some clinical nurse midwives and lecturers tend to be inspirational while others are not (Burnard and Morrison,1993). Some of the issues outlined as challenges may not be challenges at all, they could be mere myths. For instance, the belief that a male student

cannot achieve good grades; if clinical assessments were conducted in a transparent manner, this misconception could be dispelled.

Students also need to appreciate the fact that patients have rights, too, and have own preferences founded on their cultural and religious background. As such, a nurse midwife should be flexible and not become discouraged when a patient expresses preference for certain care providers.

With regard to scholarship awards in nursing education, some sponsors tend to outline criteria for beneficiaries. It is, therefore, proper for college management to communicate the criteria to all stakeholders thereby encouraging transparency.

5.0 SECTION D: RECOMMENDATIONS BY MALE STUDENT NURSE MIDWIVES

In order to strengthen the education of male student nurse midwives, the student study participants came up with the following proposals for consideration by those contributing toward their education.

- Supportive supervision should be provided to all students particularly male.
- Encourage students that are lagging behind both in class and in the clinical area.
- Teach all students. Do not segregate or mock them. The student male nurses want to feel that they are part of the profession. Mocking the male students reduces their motivation. Some qualified nurses and lecturers are said to marginalise male student nurses.
- Do not sideline or negatively label the male students because this negatively affects their learning both in class and in the clinical area. For example statements like *"I don't like these male nurses"* *'these males they do not perform well'* and *"males are not for this particular profession..."* **Female lecturer, study participant, Line32**
- Educators should not have preconceived ideas that all male student nurses are difficult to handle. This is counterproductive since some of them may be well behaved. A positive attitude toward the male students is more effective since every individual is unique.
- Create a conducive learning environment for students both in the classroom and in the clinical area.
- When promoting the nursing career be clear as to what nursing is and what nurses do in the hospital. Do not project a false picture of nursing but rather a realistic version to assist people make an informed choice thereby preventing them from possibly regretting having joined the profession.
- Acknowledge or give credit where it is due based on merit and not on gender.
- Be role models in care provision. For example, dressing in full uniform. This especially applies to qualified male nurses. Students learn through observing and imitating the behaviour of their lecturers and/or supervisors and/or nurse midwife clinicians.

- Ensure the availability of resources during clinical allocation. This includes protective wear, such as gloves, to enhance internalisation of skills learnt in class.
- Where applicable, ensure availability of male nurses to act as role models both in college as lecturers and in hospitals as bedside nurses.
- Male students should also benefit from scholarships on an equal basis as females based on the criteria at hand.
- Avoid correcting students' mistakes in front of patients unless in life threatening situations.
- Some male students tend to feel isolated such that they face difficulties during learning and interacting. During clinical allocation, avoid allocating one male student nurse amongst 10 or more female student nurses.
- During classroom teaching, a lesson should be less than 4 hours. The students become tired and lose concentration.
- Stereotyping titles should be revisited and changed so as to emphasise equality. Titles like; "sister", "matron", "sister in-charge", "sisters' office" for example are gender sensitive.

The core business of students in the clinical area is to learn not to be used as a pair of hands. Therefore, during clinical attachment, students need to be given ample time for learning so as to meet their training objectives. The students also need to take responsibility for their own learning and maintain professional conduct.

6.0 SECTION E: RECOMMENDATIONS BY NURSE EDUCATORS & CLINICIANS

This section is a compilation of recommendations made by some qualified nurse midwives and lecturers who participated in the study in order to help provide a conducive learning environment to student nurses both at college and at the clinical area. In addition, recommendations were made which could help support qualified male nurse midwives maintain professionalism and become role models.

Some nurse managers and lecturers stated:

“...The male nurse should not be segregated. There is need for us to work with them as a team. Proper counselling should be provided where necessary....” Nurse Manager, hospital 9. Line 51.

The following are the proposals made by a majority of the nurse managers and lecturers.

- Career guidance should be provided to prospective nurse midwives so that they can make an informed career choice.
- Hold frequent departmental meetings in the hospital to discuss issues of professionalism such as the dress code and behaviour in general to help the qualified male nurse midwives maintain professionalism at the work place.
- Consider introducing specialty courses at undergraduate level to help improve retention of male nurses in the profession.
- Encourage peer teaching (amongst senior and junior students) in the clinical area. Students feel they can also learn from each other.
- Some male student nurses should be assisted to acquire a caring spirit by changing an individual's mind-set and acquiring appropriate skills for the benefit of the patients. Some of the students feel they undergo the process unaided. They need to be closely supervised, monitored and/or supported especially during the clinical allocation that focuses on acquisition of basic nursing skills. Availability of appropriate resources would also make a difference.
- Lecturers, nurse midwife clinicians and male student nurses should minimise gender differences in nursing. All should strive to be neutral for the benefit of the patients.

- When teaching about gender issues in nursing education, nurse educators should also critically try to see how best to handle the 'minority' student male nurse in the profession. Often, when it comes to gender issues, people think of empowering the girl child but, in nursing, the men need to be empowered too, for example, through appropriate skill acquisition.
- Improve conditions of service for nurses.
- The male nurse midwives are encouraged to form their own associations/clubs where they can support each other during training and/or after qualifying.

7.0 REFERENCES

- Benner, P. Ed. (2001). From Novice to Expert. Excellence and Power in Clinical Nursing Practice, Commemorative Edition. New Jersey, Prentice Hall.
- Burnard, P., and Morrison, P. (1993). Survival Guide for Nursing Students. Oxford, Butterworth-Heinemann Ltd.
- LAI, K. P., and LIM, H. P (2012). Concept of professional socialisation in nursing. *LeJSME*, 6, 31-35.
- Meyer, M. S., and Niekerk, E. S. (2008). Nurse Educator in Practice. South Africa, Cape Town, Juta & Co Ltd.
- O'Lynn, C. (2013). A Man's guide to a Nursing Career. New York, Springer Publishing Company.
- Stott, A. (2004). Issues in the socialization process of the male student nurses: Implications for retention in undergraduate nursing course. *Nursing Education Today* 24. 91-97.

