

Structure of learning in the childbirth care training of midwife students —A Japanese perspective

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Abstract

In Japan, there are the various courses offered such as a graduate school, a university non-degree graduate program, a university, junior college non-degree graduate program, and the training school for certified midwife education. The schedule of the University's certified midwife educational program becomes overcrowded at the time of graduation with the three national examinations to acquire the certified nurse, public health nurse, and midwife certificates. Therefore the period of the midwife training is limited. However, the problem in the unified education curriculum is the lack of "substantial clinical training". Therefore, it is important how a teacher educates a midwife student in only 10 cases of childbirth care. I think it is necessary to educate the students step by step in the 10 childbirth care examples. Therefore, it is important to understand the process from the student's viewpoint, how a student develops in these 10 cases.

The purpose of this study is to clarify the learning process of the undergraduate students selecting in midwifery based on their experience in 10 cases of childbirth care.

This is a qualitative descriptive study utilizing the phenomenological approach. Individual semi-structured interviews were conducted with a purposive sample of 11 students who select midwifery in the undergraduate from one university in Japan.

As a results, The learning in the childbirth care training of all study subjects was surveyed and common learning elements for all 11 students were seen. The learning which was common to all students was identified. Learning was as follows:
1st stage after 1 delivery: Self realization

2nd stage after 3 deliveries: Awakening to others' existence and understanding their situation

3rd stage after 6 deliveries: Building human relationships

4th stage after 10 deliveries: The appearance of consciousness as a midwife and feeling of self-growth

Through this study it became clear that the students in the midwife graduate course have deepened their learning through the 10 childbirth care experiences during the training. It needs to educate student steadily in the 10 childbirth care examples based on this result.

Key words

childbirth care, learning, midwife student, undergraduate, phenomenological approach

Introduction

Today we have well-established medical care practices in the perinatal period, even in critical situations in Japan. Therefore midwifery is a specialty and certified midwives are demanded

professionals and expected part of medical care. Here we will review the educational content in the certified midwife education^{1,2)}.

There are many requirements that a certified midwife has to possess and necessitates a robust

educational program – requirements such as general psychosocial assessment ability, knowledge of support technology, and knowledge of the pregnancy, childbirth, and the puerperium period progress. In Japan, there are the various courses offered such as a graduate school, a University non-degree graduate program, a University, junior college non-degree graduate program, and the training school for certified midwife education. Above all, the University has 96 schools as of Apr, 2010. In 2010 the ratio of a first degree graduate and the number of certified midwife national examination passers was about half³⁾. The University's certified midwife education program fulfills an important role in midwife education.

The schedule of the University's certified midwife educational program becomes overcrowded at the time of graduation with the three national examinations to acquire the certified nurse, public health nurse, and midwife certificates. Therefore the period of the midwife training is limited. In the training, the student does not only acquire theoretical knowledge, but is also exposed to various real life situations and develops knowledge and experience for them. The student learns to understand people's experiences different from their own in such situations and can deepen their learning through their empathy and concern. Overall, the student is involved in 10 cases of childbirth care. The student will learn and participate in nursing to the laboring mother, a midwife diagnosis, and childbirth assistance technology. However, the problem in the unified education curriculum is the lack of "substantial clinical training"⁴⁾. Therefore, it is important how a teacher educates a midwife student in only 10 cases of childbirth care. Additionally, the unified education curriculum need "carefully selected training content" and "substantial content by creating step-by-step instruction". To this end, I think it is necessary to educate the students step by step in the 10 childbirth care examples. Therefore, it is important to understand the process from the student's viewpoint, how a student develops in these 10 cases. In many foreign countries, the research which understood the experience in

training of a student is reported⁵⁻⁸⁾. However, there is little research in Japan and it cannot understand a student's situation⁹⁻¹⁰⁾. Therefore, I think that the more substantial education will be performed by clarifying the situation of 10 childbirth cares of student.

Methods

1. Purpose

To clarify learning in the childbirth care training of undergraduate students selecting midwifery.

2. Study Design

Studying 10 examples of the student in the process of childbirth assistance. It is a qualitative descriptive organon to analyze interview data inductively.

3. Study Subjects and period

11 students who select midwifery in the undergraduate and agreed to the study's purpose. Age of the students is 26 years old from 21 years old. The average age is 22.2 years old. All the students are women. In the text, I express students in the alphabet of K from A. The study period is from August of 2008 to November of 2008, and from August of 2009 to November of 2009.

4. Ethical considerations

One important point of the research was not to influence the training of any participating students in any way. This meant that even the research purpose and method could be interrupted if interfered with training, the study subject had the freedom to withdraw, the research was clearly explained to the student orally as well as the official document shown explaining that there is no disadvantageous profit and research findings, and the subject's consent was obtained by signing a consent form. The interview was performed in the single room in order to strictly observe the research subject's privacy; it obtained consent of the person herself, and recorded the contents of the interview. All the data was obtained anonymously so the individual could not be identified. In addition, this research was examined and recognized by the Ethics Committee of Toyama University (No 21-5).

5. Data Collection

Individual semi-structured interviews were conducted: one after the first case of childbirth care, then after 3 cases, 6 cases and finally after 10 cases. At the time of the interview, I took the difference of the arrival degree of the assistance experience of the student into account¹¹⁾. Interviews were conducted on the same day or next day of the childbirth care to try to capture the experience what the students thought and felt during the care. The interviews were recorded with the permission of the study subjects.

6. Data-analysis

Since this research has aimed at analyzing a student's subjective experience it utilized the phenomenology analysis method. This research based on the idea of the descriptive phenomenology of E. Husserl to aim at finding similarities from the experiences¹²⁾. The analysis method also described, interpreted and arranged data through A. Giorgi's descriptive phenomenology^{13,14)}.

The concrete method is as follows:

1. I read the record of the study subject's experience and grasp the whole meaning.
2. I read, record and hold a composition element (a unit of a specific meaning).
3. I relate a composition element with the meaning of other composition elements and the whole.
4. I decide which element from the study subject's concrete language contains the main meaning then interpret it in the language of a researcher.
5. Then the common features were recorded from 11 subjects' interpreted description.

7. Data Validity and Reliability Control

Data analysis and interpretation was supervised by a specialist from the University's.

Results

The learning in the childbirth care training of all study subjects was surveyed and common learning elements for all 11 students were seen. The learning which was common to all students is described below. The bold letter statements are the learning experience units. In addition, the

quotation marks are quotations from the students.

1. In the 1st childbirth care, as the phenomenon of a delivery is felt by the hands and eyes for the first time, the students felt puzzlement at the difference between imagination and an actual delivery. They were impressed by the birth of a new life and realized the weight of a midwife's responsibility. "When I look back I think I will be concerned about a woman in labor more." someone who has not been much concerned about that before.

"Feelings experiencing actual childbirth and the differences to prior imagination."

When the students first experienced an actual delivery their feelings were the followings: Student A said that "when the doctor cut perineum with scissors I thought that it was disagreeable" Student C: "I came to feel panic on the way, was very shaken and then fearfulness followed", and student F felt completely different from concerns she had before, when the first baby coming out was touched. Students were bewildered by how different the actual delivery was from their prior imagination. The students' heart experienced feelings like shaking, feeling fearfulness or uneasiness at times.

"When the phenomenon of actual childbirth is taken in by the eyes and hands."

When the actual delivery care is carried out for the first time, one example of feelings was "does the woman has to push very hard when the baby is already starting to become visible"? Student G: The feeling which presses down a vulval orifice power was stronger than she considered. Student K: the feeling which comes out with so much vigor couldn't be understood by a model. But the pushing touch was found. The delivery status was felt by actually touching the posterior fontanel, sutura sagittalis, and so on. Other things experienced through touch were "the situation where a child descends gradually", "the situation where a child's head comes out in crowning".

"While impressed by the birth of a new life, they realized the weight of a midwife's responsibility."

For the first time in their life many students were concerned with the birth of a new life and Student B thought that "being a midwife is really

serious". She felt like going into an uncanny world. The students realized the weight of their responsibility to a new life and being a midwife. Student H: "When I understood through the mother's earnest expression that her delivery will be hard, my legs trembled. I thought that now I have an extraordinary responsibility".

"The relationship to a woman in labor has not been taught."

Students had looked back upon their relations to the laboring woman for the 1st time as follows:

Student A: "The situation of hearing and talking to a woman in labor was mortifying. I wanted to tell her a positive situation and to respond to her worries". Student J: "Although I was in the side silently since the laboring woman was very tired, I didn't understand what tasks I should carry out." The students all noted the importance of considering the needs of a laboring woman, and to practice the required care.

2. By the time of the 3rd childbirth care, the students know that creating a relationship with a woman in labor is important. They can understand the laboring woman's situation because they are at her side. Moreover, they also noticed the existence of the husbands who escorted their expectant wives.

"The students create a relationship with a woman in labor at the 1st phase of a delivery, understand their situation and perceive her thinking."

Since the advance of the delivery and the laboring woman's condition could be observed and communication was maintained with her by her side, the students understood that creating a relationship with a woman in labor is important at the 1st phase of a delivery. Student D: "I thought that communicating with people lowers the amount of pain being felt by laboring woman and it's important to be seen and care for her feelings." The laboring woman's situation is not known only by observing the instruments and it's important to be at her side. Student E: "It was easy to be concerned about the endurance of a woman in labor at the 1st phase of the delivery. I thought that relationship with a woman in labor at the time

of the 1st term of the delivery was important." As it turns out it is important to be at the laboring woman's side, or being concerned about her and observe her from the beginning of the delivery. The relationship in the 1st phase is also important.

"The students noticed the existence of the husbands who escorted their expectant wives."

By the 3rd delivery case, students also became conscious of the husbands who escorted their expectant wives and stayed by their side during delivery. Student G: "I wanted to help in the relationship of the husband and wife during the 1st phase of the delivery. I observed as the husband was speaking to his wife in labor, or gently stroking her waist in the advance stages of delivery. I helped the husband to be at her wife's side during delivery. I also think that a husband can support his wife and it is important to urge such a support." Students understand that the husband was a big support for the woman in labor and that the status of the delivery and the fetus was naturally explained to the husband by just him observing the situation.

3. By the time of the 6th delivery care, the students were able to care for a parturient woman in the 1st phase of the delivery, face the woman in labor, and deliver good childbirth care for her. However, they felt disappointed due to their inability to do more before.

"Came to be able to perform assistance to the laboring woman in the 1st phase of delivery."

By the time of the 6th childbirth care, the laboring woman's situation is clearly seen and the students believed that they can now provide the required assistance. Student G: "I could perform the required assistance to the woman in labor according to the birth plan, and the woman in labor also seemed to be relieved. I think now I came to be able to perform the 1st phase of delivery care according to required assistance and propose as required to go to toilet or urge rest." Student J said she knew how to provide assistance to the woman in labor. She thought that she would have an early delivery and all possible care was carried out accordingly. As the labor pains came and the delivery advanced and the required care

was decided and carried out like foot bath, acupressure, etc., the student thought that she has understood required assistance in the 1st phase.

"Facing with a parturient woman students were concerned about good childbirth care."

Furthermore, in the 6th childbirth care, the students' attention shifted to the relationship with the parturient woman and they were being conscious of the good childbirth care for her.

Student C: "I think I came to be concerned about the childbirth care for a woman in labor. It was a great opportunity to hear a pregnant woman's thoughts during pregnancy and provide assistance which meets her thinking and desires." Student E: "In many cases I came to be only by myself with the woman in labor and I was able to be concerned about her and take care of her needs. I tried to look at the delivery from the woman's viewpoint and this brought me closer to her; helped me to be more concerned about her and her child."

"The students felt disappointed due to their inability to do more before."

At this halfway point of their training after the 6th case of childbirth assistance students looked back upon and reflected on what they have done so far. They felt disappointed due to their inability to do more, and considered their future actions. Student D: "I must make appropriate judgment and must act myself. Until now the midwife helped me in many various tasks. Now I want to be able to do things by myself."

4. By the time of the 10th delivery care, the students thought that now they can predict and judge the delivery progress well. On the other hand, they also recognized that their management skills during time of abnormalities have room for improvement. As they looked back upon ten examples of childbirth delivery they have learned what the role of the midwife is and felt they could improved themselves.

"I think that now I can predict and judge the delivery progress well."

By the 10th childbirth care the students thought that delivery progress could be predicted well. Student C: The time to go to the delivery room must be determined by the laboring woman's

expression, the sagittal suture, and by the result of an internal examination. It turned out that based on these information she has correctly understood the right time to move to the delivery room. Student H: "An internal examination can help observing the feeling of oppression of the anus, the cycle of the pain, etc., and the delivery progress can be predicted."

"I want to be able to perform good care during time of abnormalities in the future."

When students finished the 10th childbirth care they thought that they have to learn more about good care during times of abnormalities. Student A: "When something abnormal happened, I couldn't take any calm actions anymore." Student D: "Childbirth does not necessarily go smoothly. When a woman's situation has change suddenly, I wanted to understand the situation and act." Student G: "The congestion on the baby's face was strange and I couldn't judge whether it was a cyanosis or a congestion. In the future I have to learn more what actions to take when something unusual happens."

"Learned the role of the midwife."

Furthermore, students understood through the delivery which they experienced what the midwife's work was, and felt a sense of responsibility and charm. Student I: "A midwife's work is to assist bringing out the power of the woman and the baby to the maximum extent, and to carry out childbirth. The responsibility of holding the mother's and the baby's lives in your hand is very large." Student H: "Childbirth is not only the laboring woman's experience but the family's experience. It is wonderful that this joy could be understood and supported by me."

"Students improved themselves."

Students looked back upon their experiences from the 1st care to the last and realized how much they grew and improved since the beginning. Student E: "Compared to my 1st delivery, I think I can act now by myself when I face with a situation, and I feel a sense of accomplishment." Student K: "Compared with the 1st-2nd delivery, it is now possible for me to take care of the situation of a woman in labor."

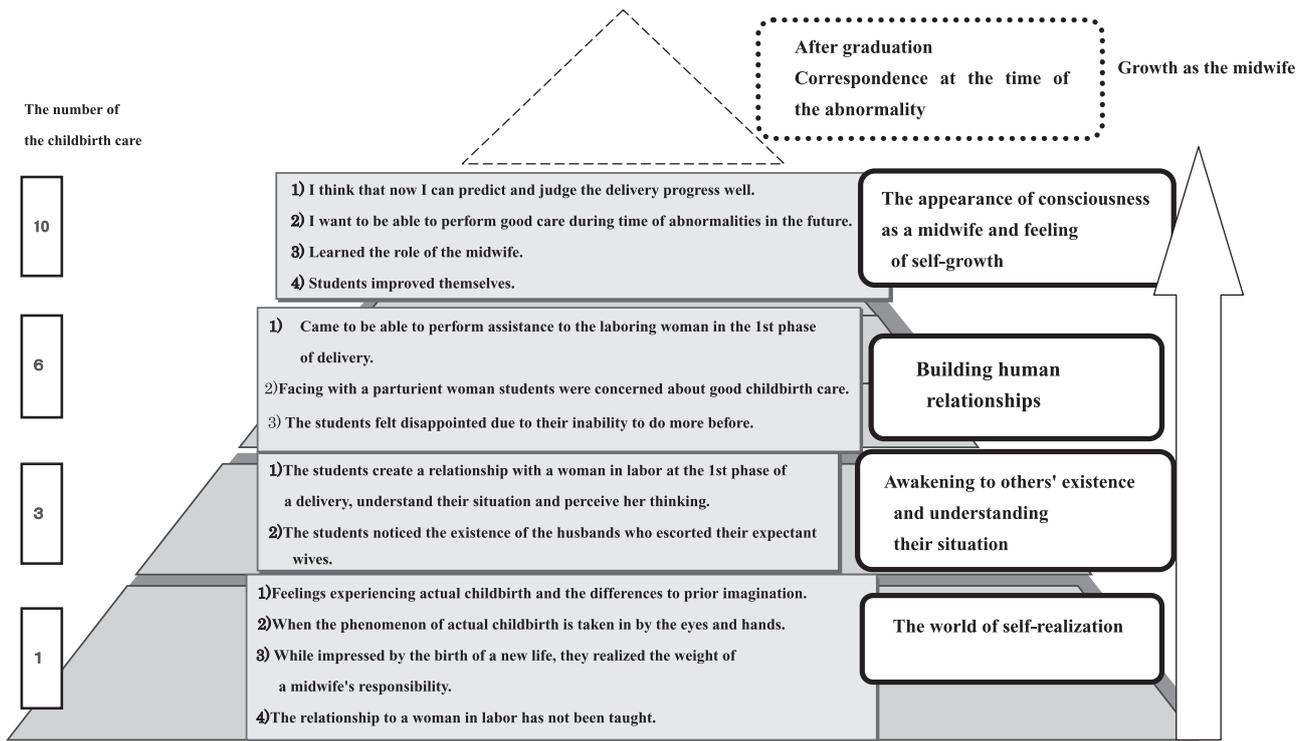


Figure 1. Essence structure of learning in the childbirth care training of midwife students*
 ※annotation : Words quotation of the E. Husserl Phenomenology

Discussion

1. Structure of learning in the childbirth care training

E. Husserl¹⁵⁾ thought that the following two areas exist in man's recognition: where a common view is materialized, and where a common view is not materialized. He said that the area where a common view is materialized is the "essential structure." Based on the idea of E. Husserl, the contents which were common in the students' experiences during the 10 delivery care are considered to be the essential structure of learning. The essential structure of learning of students is shown in Fig. 1. It is observed that the learning of students deepened as their experienced more and more childbirth care.

The 1st stage: The world of self-realization

During the 1st childbirth care when the students experienced the phenomenon of actual childbirth, they felt the difference between a lecture and the actual practice, and they felt fearful and insecure at times.

In the education of a student who aims at being a doctor or a nurse, the method of early exposure

is useful. Although there are many good effects, it is also documented that puzzlement, shock, etc.^{16·17)}. That is, the students experience a reality shock from the actual clinical conditions. In doctoral or nursing education this early exposure is positioned before training. However, in midwife training of a university undergraduate course, the 1st childbirth care during training is this early exposure. Since early exposure largely effect the student's motivation for further study, it is essential for the teacher to understand the student's reality shock and consider tying this experience to the next stage of study. On the other hand, the students also experienced and understood the physical phenomena of labor pains, signs of impending delivery, an internal examination, etc., through their senses, especially through touch, while they felt somewhat puzzled. E. Husserl¹⁸⁾ said that feeling of movement called Kinasthese consciousness happens in direct experience. This is the consciousness where the feeling of my movements and the feeling of objects are united. Kinasthese consciousness includes visual consciousness and tactile consciousness, The understanding of the

phenomenon is carried out through these consciousness.

The 2nd stage: Awakening to others' existence and understanding their situation

By the 3rd case, the students go through the 1st phase of a delivery being at the side of the woman in labor. By that time they understand woman's situation and her thoughts. According to E. Husserl, one's understanding is one's experience as it can be felt through the body. In the 1st phase of a delivery the students experience everything together with the woman in labor: the pain of childbirth, the feeling of oppression of the anus, the woman's expressions, sweat, and the constant changes of the body's situation are all felt together. Through this the students can understand the mother's experience. Therefore, in order for a student to understand a woman in labor, they situated close to her at the 1st phase of the delivery. First, the student needs to observe how the body situation of the woman changes. By this stage of learning, concern shifts from the self to others and can be called the stage of beginning to understand others.

The 3rd stage: Building human relationships

By the 6th childbirth care, the students are already well concerned with the laboring woman during the 1st phase of the delivery; they look at her situation and perform good childbirth care for her.

For this to happen it was required for the students to be at the side of the woman at the 1st phase of the delivery, and to understand the physical changes of the woman's body by the 3rd care. Through these the students understood observation and care during the 1st phase of delivery, and through actual practice they could also perform necessary assistance. As a result, the students thought that they can now manage the necessary care for the 1st phase of delivery. In turn this confidence made the students attentive to the laboring woman and they were able to determine good care for her. Students can build relationship with the mother by being actively concerned about her and by understanding her viewpoint.

From the things above we can say that this stage is the stage of learning of building relationship with others.

The 4th stage: The appearance of consciousness as a midwife and feeling of self-growth

After the 10th childbirth care students thought that by now they could predict and judge the delivery progress as required for a midwife based on their experience of 10 deliveries. "Acquisition of assessment capability of the delivery progress" and "assistance to the childbirth which respects the woman in labor and beneficial to her" are also points raised as important learning points of childbirth care training¹⁹⁾. As a result, students thought that by this time they could perform the assessment and assistance in a normal delivery. Furthermore, students had stated in their own language what a midwife's role is. We can say that they were in the state where students considered the midwife specialty through ten examples and also realized more deeply what a midwife's responsibilities were. This stage is considered to be the stage of the appearance of consciousness as a midwife.

There is a concept of learning of legitimate peripheral participation²⁰⁾. This concept holds that when a student participates in an expert's activities the learning is essentially embedded in the situation. This learning situation surely applies in childbirth care training. Students are learning in concrete situations where they participate in activities in place of a midwife with a skillful midwife at their side. There's a formation of an identity in this learning. Therefore the students are considered to be conscious of their identity as a midwife by the 10th delivery care. In order to get to this stage, students expected to learn of being close to a woman in labor by the 6th delivery practice, understand a laboring woman's situation, and create relationship with her.

E. Husserl²¹⁾ thought that the fundamental characteristic of consciousness is "intentionality". In this view every mental phenomenon is directed at an intentional object and the object's essence is perceived through the feeling and experience of each interaction with the said object. According to

this, in the students' learning during training the woman in labor was the midwife's intentional object. The students understood the experiences of a laboring woman through their own numerous experiences during training. After the learning period students understood the knowledge necessary for a midwife and the consciousness as a midwife appeared. On the other hand, students thought they have to learn more about childbirth care during times of abnormalities in the future. The issues of obstetrics emergency and newborn infant revival are raised as content important in a midwife's postgraduate education²²⁾.

Similarly from the viewpoint of the students' present condition in this research, "actions at the time of abnormalities" is considered to be content which must be practiced in the education after graduation.

According to each time of the training, it became clear as things mentioned above that there was a stage of the learning. E. Husserl²³⁾ thought about time as follows. When consciousness is turned to the object, in progress of time, I understand a target expanse. On the other hand, I am conscious of self in progress at time when attention is turned at time. When the learning of the student spread through each time and was conscious of time called the tenth case, student reflected at oneself. I think that the learning of the student was comprised of these two intention from a viewpoint called the time.

2. Education in the childbirth care training

Central contents of the education in the midwifery training were suggested.

In the 1st childbirth care, it is necessary for the teacher to let express reality shock which a student felt through real experience. And by the 3rd childbirth care, Students can associate with a woman in childbirth of delivery the first. Therefore the teacher lets you practice acquirement of communicative competence becoming basic and the support to a woman in childbirth.

Training becomes in the latter half in the 6th childbirth care, and it may be said that it is the time when it confirms the future training. Because it has experience that it varies as for the student

than what a period is limited to as for the training of undergraduate in a short time, it is important that the teacher confirms learning from experience²⁴⁾. The teacher performs reflection with a student so that a student can confirm growth of the self after 10th childbirth care.

Limitations of the study

These findings are from students in one University in Japan and may not be representative of students in other University in Japan and overseas. Students were all volunteers and may differ from those who did not wish to participate.

Conclusion

This study became clear that the students in the midwife graduate course have deepened their learning through the 10 childbirth care training. Learning was as follows:

1st stage : Self realization

2nd stage : Awakening to others' existence and understanding their situation

3rd stage : Building human relationships

4th stage : The appearance of consciousness as a midwife and feeling of self-growth

Acknowledgements

I wish to acknowledge the students who participated in this research project.

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日本における助産学生の分娩介助実習における学びの様相

松井 弘美

要 旨

日本の助産師教育は、大学院、大学専攻科、大学、短期大学専攻科、養成所と様々なコースがある。大学における助産師教育は卒業時に看護師・保健師・助産師の3つの国家試験受験資格取得のため、過密なスケジュールとなっており、助産学実習の期間も限られている。統合カリキュラムにおける助産教育の課題は「臨地実習の充実」であり、分娩介助実習においても分娩介助10例において段階的に教育していくことが重要である。そのためには、分娩介助10例において学生がどのように実習を展開しているのか、その過程を学生の視点から捉え理解することが大切である。

本研究の目的は、学士課程で助産を選択する学生の10例の分娩介助実習における学びを明らかにすることである。研究方法は現象学的アプローチを活用した質的記述的研究である。日本の一大学における学士課程で助産を選択した11人の学生に半構成的面接を行った。

その結果、11人の学生に共通した学びとして、1例目では【実感できる自己の世界】。3例目では【他者の存在の気づきと状況の察知】。6例目では【人間関係の構築】。10例目では【助産師としての自覚の芽生えと自己成長感】が見出された。

この結果に基づき分娩介助10例における学生の教育を行うことが必要であると考えられる。