

The perception of students towards the educational approach of clinical instructors during the maternity nursing clinical practicum : Constructing a scale of students' perception and tendency of students' perception according to their background

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The perception of students towards the educational approach of clinical instructors during the maternity nursing clinical practicum: Constructing a scale of students' perception and tendency of students' perception according to their background

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Abstract

Objective: Nursing practicum is where students learn practical skills by fusing knowledge, skill and attitude making the role of clinical instructor important for nursing students. However, students' perception of their clinical instructors' educational approach has not been studied. Therefore, this study aims to elucidate the students' perception.

Methods: Semi-constructed interview was performed to students to extract the educational approaches made by clinical instructors. Factor analysis was performed to the data obtained from the interview, and scale to measure the students' perception was constructed. The scale was used to measure 228 students of their perception and statistically analysed.

Results: The students' perception of their clinical instructors' educational approach consisted of 3 factors, 'A technical approach to deepen students' understanding and inspire interest in maternity nursing', 'An instructional approach promoting students to understand the significance of their experience and to think systematically' and 'Being a role model and providing the students to experience maternal nursing care'. The perception of university students of items in factor 3 were more affirmative than of nursing school students. Moreover, students percept clinical instructors to "Praise the students and give images of nursing care" as "Do not think so". Among students whose maternity nursing practicum took place in different time of their nursing curriculum, the degree of affirmativeness towards clinical instructors' educational approach was different.

Conclusion: 1) Students' perception of their clinical instructors' educational approach were comprised of 3 factors, supportive approach to deepen the understanding through nursing practicum, implicative approach to systematically think, giving opportunity to perform care and being a model. 2) Students had little perception of instructors being "Looking after and praising" them. 3) University students were more affirmative in items of factor 3<Being a role model and providing the students to experience maternal nursing care>than of nursing school students.

Key Words

clinical teaching, educational approach, student perception, maternity nursing, characteristic

Introduction

In Japan, nursing education curriculum was introduced in 1951. The current curriculum was revised in April 2008 where more than 3000 hours of education was made the criteria, and clinical practicum takes up one third of it.

Clinical practicum in nursing education has more units than any other subjects, and is a crucial opportunity to master the ability to develop nursing practice¹⁾. Clinical instructors who takes an important role in teaching nursing students during the clinical practicum is reported

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to affect the learning^{2,4)}. Thus, the clinical instructor's instructional ability is questioned when the subject of improving the education content and clinical nursing skills of students is brought up⁵⁾.

Concerning clinical training of students, Benner^{6,7)} stated that in order for safe and efficient training to be performed, clinical instructors has to be an expert and have experience in teaching clinical practicum. Shiraki et al.⁸⁾ studied the relation of clinical instructors and nursing students, and reported that students considered supportive and warm correspondence from their clinical instructor as an affirmative caring experience. Lee et al.⁹⁾ reported that it is important for clinical instructors to try to relate to their students. Additionally, Pamela¹⁰⁾ concluded that it is important for clinical instructors to make the students' experience worthy and teach them 'on the spot'. On the other hand, Yoneda et al.¹¹⁾ indicated that clinical instructors feels uneasiness and less confidence in teaching when the students gave them different reaction or acted differently from what they had expected. Takizawa et al.¹²⁾ (1991) pointed out that students may have different viewpoints from what teachers expected to teach. However, students' perception of clinical instructors' educational approach has not been studied.

The objective of this study is to elucidate and measure the students' perception of clinical instructors' educational approach according to characteristics during the Maternity nursing practicum.

Methods

1. Operational definition of words

"Educational approach" is an approach such as necessary advice or educational support for students made by clinical instructors. "Perception" is how students notice and understands their clinical instructors' approach.

2. The process of constructing a scale to measure students' perception of their clinical instructors' educational approach

There were four steps taken for constructing the scale to measure students' perception of clinical instructors' educational approach. The first step was to extract the contents of students' perception of their clinical instructors' educational approach (hereafter students' perception) and examine how it could be measured. Next, the extracted contents were examined by comparing to the contents of the existing scale that measures the clinical

instructors' perception of their educational approach. Then, a scale to measure the students' perception quantitatively was constructed. Lastly, the reliability and validity of the scale was examined, and using this scale, the students' perception was measured.

1) Extraction of the contents of students' perception

(1) Study period

The study took place during October 2009.

(2) Subject

The subject of his study were 11 students who have finished their maternity nursing practicum in either 4-year nursing university (hereafter university) or a 3-year nursing school (hereafter nursing school). The convenient sample of 2 educational institutions located in the Hokuriku region of Japan was chosen for the study.

(3) Method

A comprehensive interview was made to students on what sort of educational approaches they received from their clinical instructors. During the interview, students were considered to speak freely of their reflection on their clinical instructors' approach and how it helped them to achieve their aim. The interview was 30 to 50minutes long, and was consented to audial record on IC. One student did not consent to audial recording, so a note was taken. From the audial record of the interview, a written record was made. The data was then abstracted by conducting content analysis and coding according to similarities and difference by 3 clinical instructors and one researcher. The abstracted contents were then checked to make sure that there were no difference in the meaning and interpretation of the contents by 2 other clinical instructors.

As a result, the students' perception of clinical instructors' educational approach were summarized into 32 items.

2) Composition of the contents from the related existing measure

(1) Study period

The study took place during October 2009.

(2) Subject

The study subjects were 16 clinical instructors who were taking charge of maternity nursing practicum in 3 medical institutions. A convenient sample of medical institutions located in Kansai and Hokuriku region of Japan were chosen for this study.

(3) Method

The objective and method of this study was explained

to the person in charge of each institutions by the researcher using a written document. Clinical instructors who agreed to participate in this study was asked to evaluate whether the 18 items of 'Educational approaches of clinical nurse instructors' developed by Hosoda et al.¹³⁾ could be used in maternity nursing practicums.

As a result, all 18 items developed by Hosoda et al.¹³⁾ were evaluated applicable to maternity nursing practicum by 14 instructors. However, instructors made comments such as "the school should provide literatures" on item 'Preparation of literatures needed for students' learning', so this item was removed. On the other hand, 4 new items were suggested to add to the 18 items, which were 'It is necessary to mediate between not only the pregnant women and nursing mothers but also their family', 'Helping students to understand the evidence behind nursing care they perform', 'To think of motherhood and fatherhood not only as a nurse but as an individual self', and 'To understand and feel the importance of normality'.

3) Construction of scale to measure the students' perception of clinical instructors' educational approach and examination of content validity

Items obtained from the previous 2 steps were than considered and revised on its meaning, duplication of the contents with 3 teachers and 4 clinical instructors specialized in maternity nursing. A scale of 26 items to measure 'Students' perception of clinical instructors' educational approach (hereafter scale to measure students' perception) was made. Each items were to be answered by a 5-point evaluation, ranging from '1. Do not think so at all', to '5. Think so very strongly', with the total points ranging from a minimum of 26 points to a maximum of 130 points. The higher the points scored, the more the student recognize and percept the educational approach of their clinical instructor.

4) Composition validity and reliability of 'Scale to measure students' perception', and examination according to attribute

(1) Study period

The study took place from November 2009 to November 2010.

(2) Subject

The study subjects were students who have finished their maternity nursing practicum in 7 schools comprising of three universities, and four nursing schools in the Hokuriku region of Japan.

(3) Method

The objective of this study was explained and permission for data collection was obtained from the school prior to the distribution of questionnaire. The questionnaire was in anonymous self-written format, and was instructed to be answered within 1 week after the students finish their maternity nursing clinical practicum, and to be submitted into a locked box which set up in front of the room of the teacher in charge of the maternity nursing clinical practicum. The researcher collected the questionnaires 7 days after the end of maternity nursing clinical practicum.

The questionnaire was comprised of questions asking gender, employment experience, years of experience, practicum timing and duration, education course, which year of the course they were in, and the scale to measure students' perception.

(4) Analysis

Factor analysis by the promax rotation of the principal factor method was used to consider the composition validity of the 'Scale to measure students' perception', without specifying the number of factors. Items with factor loadings below 0.4 was deleted¹⁴⁾, so the scale consisted only of items with eigenvalue of more than 1.0. The reliability of the scale was considered using Cronbach's α reliability coefficient.

Next, in order to examine the tendency of students' perception, distribution of their answers and normality was checked by Shapiro -Wilk test, and equality of variance was checked by Levene test. Then, the students were divided into 3 groups according to when their maternity nursing practicum took place during their rotation of nursing practicum: students who did the maternity practicum first (hereafter first practicum group), students who did the maternity practicum last (hereafter last practicum group), and student who did their maternity practicum in between the other nursing practicums (hereafter middle practicum group). Unpaired t-test or one-way ANOVA was used to analyze the difference of students' perception, Mann-Whitney test or Kruskal Wallis test was used to analyze the difference according to item of students' perception.

$p < .05$ was considered statistically significant. For statistical analysis, SPSS Ver. 18.0 for Windows was used.

3. Ethical Considerations

The study protocol was approved by the Kanazawa

University Medical Ethics Committee (Approval No. 226). Participants received a written and oral explanation on brief description and the aim of the study from the researcher, and the protection of data was promised. Further, participants were explained that their decision to participate or not to participate was a matter of free will, they can withdraw at any stage, no disadvantage would be incurred by withdrawing, no influence to their academic grading would be made, and the names of institutions and individuals would not be identifiable. Consent to cooperate was considered to be obtained by answering the questionnaire.

Results

A total of 311 questionnaires were distributed at 7 educational institutions, of which 277 were returned (recovery rate, 89.1%). 228 questionnaires with complete responses were analyzed (valid reply rate, 73%).

1. Validity and Reliability of the of 'Scale to measure students' perception'

Content validity of the scale was discussed and secured with 3 teachers and 4 clinical instructors specialized in maternity nursing. Although 'Scale to measure students' perception' consisted 26 items, one item with the factor loadings below 0.4 was removed^{14) 15)}, therefore factor analysis was conducted with the remaining 25 items. There was no distortion in the distribution of the scale (25 items), and there were no ceiling effect nor floor effect. Correlation of the item scores and total scores showed that loadings were more than 0.4. As a result, the scale consisted of 3 factors with the eigenvalue of >1. The cumulative contribution ratio was 60.3%, confirming the construction validity (Table 1).

Factor 1 included items such as no.22 "Instructors involved to increase the student's interest in maternity nursing care", and was comprised of 12 items in total. This factor was therefore described as < A technical approach to deepen students' understanding and inspire interest in maternity nursing >. Factor 2 included items such as no.3 "Giving advice to students to develop and organize thoughts based on their clinical observations" and was comprised of 10 items in total. This factor was described as <An instructional approach promoting students to understand the significance of their experience and to think systematically>. Factor 3 included items such as no.15 "Provided opportunities for student to experience

care particular to maternity nursing" and was comprised of 3 items in total. This factor was described as <Being a role model and providing the students to experience maternal nursing care>.

Cronbach's α reliability coefficient of the scale was 0.96, and the α coefficients of factor 1 to factor 3 were 0.93, 0.91, and 0.91, respectively. As mentioned above, internal consistency was confirmed.

2. Characteristics of Participants

The participants were 31 males (13.6%) and 197 females (86.4%). Of these, 106 were enrolled in universities (46.5%) and 122 were enrolled in nursing schools (53.5%). 20 students had employment experience in a medical institution prior to their enrollment in nursing school, for a mean period of 5.8 ± 3.7 (standard deviation) years (range 2-15 years) (Table 2).

For the total perception score (25 items), males scored 89.1 ± 11.45 points (mean \pm SD), and females scored 89.4 ± 16.4 . No significant difference was found between males and females ($p=0.916$).

By educational background, university students scored 89.8 ± 16.9 , and nursing school students scored 88.9 ± 14.9 . No significant difference was found ($p=0.654$).

Students who were employed prior to nursing studies scored 90.3 ± 17.4 , and students without employment experience scored 89.3 ± 15.7 , which had no significant difference ($p=0.782$). However, the perception score was high in order of students who have less than five years of employment experience (97.6 ± 13.2), students who have no employment experience (89.3 ± 15.7), and students who have employment experience of five years or more (83.0 ± 18.6).

The maternity nursing practicum was carried out in groups of 5-10 persons. The nursing practicum starts in April of the third grade, rotating the several nursing practicums within a year ending in March. The length of maternity nursing practicum was 2 weeks in universities and 3 weeks in nursing schools. The perception score was highest for the middle practicum group at 90.2 ± 16.0 , followed by the first practicum group at 88.8 ± 14.2 , and the last practicum group had the lowest score with 86.5 ± 16.3 , but no significant difference was found ($p=0.408$).

3. The comparison of the factor of students' perceptions by students' characteristics (Table 2)

1) Gender

The perception score of both male and females was

Table 1. Student Perception of Clinical Training Instructors' Approaches and Structural Contents (25 Items)

Factor/Details of Student Perception of Clinical Training Instructors' Approaches	Factor1	Factor2	Factor3
Factor 1 A supportive approach that deepened student understanding and expanded interest in maternity nursing ($\alpha = 0.93$).			
22. Instructor involvement increased the student's interest in maternity nursing care.	0.824 †	-0.046	0.046
24. The teaching provided by the instructor was suited to the individual personality and abilities of the student.	0.777 †	0.030	-0.010
23. Instructor interactions made it easy for the student to ask questions.	0.726 †	0.081	-0.039
25. When the student tried to understand the patient's point of view, the instructor provided opportunity to think, 'If it was me ...'	0.687 †	0.139	-0.005
17. Instructor praised the student's ideas about care and actions.	0.659 †	0.102	0.014
18. Even if the instructor did not speak, the instructor was nearby to provide support for the student.	0.652 †	-0.145	0.222
26. Instructor provided opportunities for the student to expand their nursing outlook.	0.643 †	0.035	0.175
21. Instructor provided opportunities for the student to consider maternity and paternity.	0.570 †	0.190	-0.040
13. Instructor encouraged implementation of appropriate ideas suggested by the student.	0.552 †	0.272	-0.072
11. Instructor approved care plans developed by the student.	0.536 †	0.314	-0.138
20. Instructor liaised so the student could work with women having babies, families, nursing staff, and other medical personnel.	0.489 †	0.050	0.157
19. Instructor valued and dealt with matters the student wanted to learn.	0.482 †	0.124	0.221
Factor 2 An approach that assigned meaning to the experience, and indicated a learning direction to promote systematic thinking ($\alpha = 0.91$).			
3. Instructor comments helped the student to develop and organize thoughts based on the clinical observations.	0.126	0.742 †	-0.099
8. Instructor taught the student to consider multiple aspects of clinical situations.	-0.139	0.742 †	0.141
7. Areas of study were suggested based on the type of care experienced by the student.	-0.084	0.718 †	0.123
6. Instructor provided support for the student to find their own value from their experiences.	0.192	0.645 †	0.055
1. Instructor comments helped the student to organize and learn information about patients cared for by the student.	0.166	0.550 †	0.106
4. Instructor's questions helped student to understand required care methods.	-0.017	0.542 †	0.266
9. Instructor evaluated the maternity nursing practice experienced by the student while reviewing it.	0.238	0.496 †	0.078
2. Instructor provided comments that helped the student to reflect on their observations.	0.316	0.492 †	-0.187
10. Instructor shared their own experiences to help the student develop opinions about maternity nursing care.	0.306	0.468 †	-0.145
5. Instructor clarified difficulties and uncertainties regarding the clinical care provided by the student.	0.107	0.457 †	0.093
Factor 3 An approach that provided opportunities to experience maternity nursing care ($\alpha = 0.80$).			
15. Provided opportunities for student to experience care particular to maternity nursing.	-0.074	0.056	0.871 †
16. Provided opportunities for student to implement their nursing skills.	0.035	0.033	0.682 †
14. Instructor was a good role model as a maternity nursing clinician.	0.408 †	-0.059	0.474 †
Eigenvalue	12.539	1.347	1.189
Contribution ratio (%)	50.157	5.388	4.755
Cumulative contribution ratio (%)	50.157	55.545	60.301

Note. Principal factor analysis, promax rotation. † Factors with a loading of >0.400. Student perception no. 12 had a factor loading of 0.25, so it was excluded.

Table 2. Student Perception of Clinical Training Instructors' Educational Approaches According to Student Characteristics

n = 228

Student characteristic	Details	n	Student perception of clinical instructors' approaches				Factor1			Factor2			Factor3		
			Score range (25-125)				Score range (1-5)			Score range (1-5)			Score range (1-5)		
			Score range	Mean	SD	P-value	Mean	SD	P-value	Mean	SD	P-value	Mean	SD	P-value
Gender	Male	31	72 ~ 110	89.1	11.4	.916 ¹⁾	3.4	0.5	.436 ¹⁾	3.7	0.5	.531 ¹⁾	4.0	0.7	.948 ¹⁾
	Female	197	42 ~ 125	89.4	16.4		3.5	0.7		3.6	0.7		4.0	0.7	
Educational background	University	106	42 ~ 125	89.8	16.9	.654 ¹⁾	3.5	0.8	.632 ¹⁾	3.6	0.7	.718 ¹⁾	4.1	0.7	.012 ^{*)}
	Nursing school	122	44 ~ 125	88.9	14.9		3.4	0.7		3.6	0.6		3.9	0.7	
Employment experience	Yes	20	66 ~ 125	90.3	17.4	.782 ¹⁾	3.5	0.7	.884 ¹⁾	3.6	0.8	.674 ¹⁾	4.1	0.7	.841 ¹⁾
	No	208	42 ~ 125	89.3	15.7		3.4	0.7		3.6	0.6		4.0	0.7	
Timing of the maternity nursing practicum	hereafter first practicum group	32	66 ~ 119	88.8	14.2	.408 ²⁾	3.5	0.6	.322 ²⁾	3.6	0.6	.475 ²⁾	3.8	0.8	.490 ²⁾
	hereafter middle practicum group	155	42 ~ 125	90.2	16.0		3.5	0.7		3.6	0.6		4.0	0.7	
	hereafter last practicum group	41	44 ~ 125	86.5	16.3		3.3	0.7		3.5	0.7		4.1	0.7	

Note. ¹⁾ Student t-test. ²⁾ One way ANOVA.

highest for factor 3, followed by factor 2 and the factor 1. Students' perceptions were more affirmative in order of <Being a role model and providing the students to experience maternal nursing care> (Factor 3), <An instructional approach promoting students to understand the significance of their experience and to think systematically> (Factor 2), <A technical approach to deepen students' understanding and inspire interest in maternity nursing> (Factor 1). However, there were no significant difference of the scores between genders or between factors.

2) Educational background

In factor 3 <Being a role model and providing the students to experience maternal nursing care>, the university students scored 4.1 ± 0.7 while nursing school students scored 3.9 ± 0.7, and there was a significant difference (p=0.012). University students' perception to clinical instructors' approaches were more affirmative than of nursing school students.

3) Employment experience

When comparing the scores among students had or had no employment experience prior to their enrolment to nursing schools, students with employment experience scored higher for items in factor 3 than of items in factor 1 or 2, although there was no significant difference (Figure 1).

4) Timing of the maternity nursing practicum

The perception score of the factor 3 was higher compared

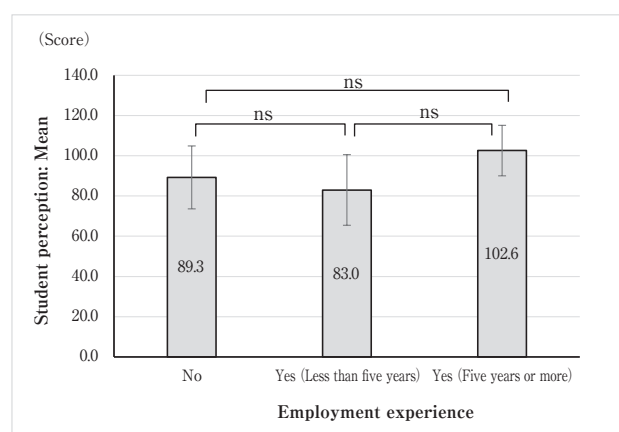


Figure1. Student Perception of Clinical Training Instructors' Approaches: Existence of employment experience

with factor 1 and 2, although there was no significant difference.

4. The degree of affirmativeness of students' perception

Evaluation of 25 items was made to determine the degree of affirmativeness of students' perception. Each item was answered from 1 to 5, where 5 being the most affirmative and 1 being the least affirmative of their perception. Among the items answered as "Think so very strongly" or "Think so quite strongly", the top three items were item no.15 "Provided opportunities for student to experience care particular to maternity nursing", followed by item no.16 "Provided opportunities for student to perform nursing care partially" and item no.14 "Instructor was a good role model as a maternity

Table 3-1. Students' perception of clinical instructors' educational approaches: Top ranked items answered either "Think so "

Rank	No./Student perceptions	Think so	
		n/228	%
1	15. Provided opportunity for students to experience care particular to maternity nursing.	174	76.3
2	16. Provided opportunities for student to implement their nursing skills.	173	75.9
3	14. Instructor was a good role model as a maternity nursing clinician.	161	70.6

Table 3-2. Student perception of clinical instructors' educational approaches: Top ranked items answered either "Do not think so"

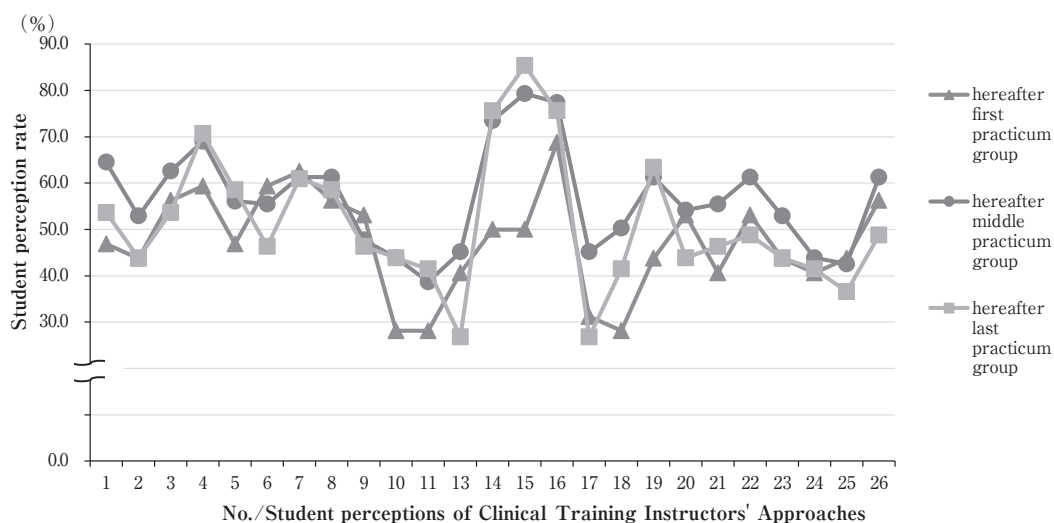
Rank	No./Student perceptions	Do not think so	
		n/228	%
1	17. Instructor praised the student's ideas about care and actions.	54	23.7
2	10. Instructor shared their own experiences to help the student develop opinions about maternity nursing care.	50	21.9
3	18. Even if the instructor did not speak, the instructor was nearby to provide support for the student.	47	20.6

nursing clinician" (Table 3-1). On the other hand, among the items answered as "Think so slightly" or "Do not think so at all", the bottom three item were item no.17 "Instructor praised students' ideas about care and students' actions." followed by item no.10 "Instructor told about his/her own experience so that student can develop own image of maternity nursing care", and item no.18 "Even if instructor did not speak, instructor was nearby looking after student" (Table 3-2).

5. Comparison of the contents of students' perceptions by students' characteristics

The scores of each items of students' perception were evaluated according to the students' characteristics (Table 4). In gender and employment experience, there was no significant difference among the items. However, in educational background, there were significant difference in perception of five items (no.14, 15, 16, 19, 23) for university students, and one item (no.21) for nursing school students.

The scores of students divided into three groups according to when their maternity nursing practicum took place in their nursing curriculum was compared. Perception score of item no.15 "experience care particular to maternity nursing" was high in the middle and last practicum groups compared to the first practicum group with significant difference ($p=0.014$). The first practicum group tended to score lower than the middle practicum group or the last practicum group (Figure 2). The first practicum group had affirmative perception in 4 items (no.6, 7, 9, 25) among 25 items compared with the other two groups. Similarly, the middle practicum group had affirmative perception in 15 items (no.1, 2, 3, 8, 10, 13, 16, 17, 18, 20, 21, 22, 23, 24, 26), and the last practicum group had affirmative perception in 7 items (no. 4, 5, 10, 11, 14, 15, 19). Item no.15 "experience care particular to maternity nursing" had the most affirmative perception. Conversely, perception of items no.6, 13, 17, 20, 25, and 26 was low, and



Note. Items answered either "Think so very strongly" or "Think so quite strongly"

Figure 2. Student Perception of Clinical Training Instructors' Educational Approaches : Comparison according to timing of the maternity nursing (three groups)

Table 4. Student Perception of Clinical Training Instructors' Educational Approaches: According to Student Characteristics (in details)

n = 228

Student characteristic Details No./Student perceptions	Gender ¹⁾					Educational background ¹⁾					Employment experience ¹⁾					Practicum timing ²⁾						
	Male		Female		P-value	University		Nursing school		P-value	Yes		No		P-value	hereafter first practicum group		hereafter middle practicum group		hereafter last practicum group		P-value
	Mean	SD	Mean	SD		Mean	SD	Mean	SD		Mean	SD	Mean	SD		Mean	SD	Mean	SD	Mean	SD	
1. Instructor comments helped the student to organize and learn information about patients cared for by the student.	3.7	0.7	3.7	0.8	.625	3.7	0.8	3.7	0.8	.851	3.8	0.9	3.7	0.8	.698	3.6	0.8	3.8	0.8	3.6	0.8	.132
2. Instructor provided comments that helped the student to reflect on their observations.	3.7	0.9	3.4	0.9	.957	3.4	0.9	3.5	0.9	.219	3.6	1.0	3.5	0.9	.833	3.5	0.8	3.5	0.9	3.3	0.9	.439
3. Instructor comments helped the student to develop and organize thoughts based on the clinical observations.	3.8	0.7	3.7	0.8	.137	3.6	0.8	3.7	0.7	.405	3.9	0.8	3.7	0.8	.294	3.6	0.7	3.7	0.8	3.5	0.7	.354
4. Instructor's questions helped student to understand required care methods.	3.8	0.8	3.8	0.8	.314	3.9	0.8	3.8	0.8	.643	3.9	0.9	3.8	0.8	.275	3.8	0.9	3.9	0.8	3.7	0.8	.796
5. Instructor clarified difficulties and uncertainties regarding the clinical care provided by the student.	3.9	0.8	3.6	0.9	.682	3.6	0.9	3.6	0.8	.851	3.6	1.0	3.6	0.9	.680	3.5	0.8	3.6	0.9	3.5	1.0	.614
6. Instructor provided support for the student to find their own value from their experiences.	3.6	0.6	3.6	0.9	.116	3.5	0.9	3.6	0.8	.452	3.7	0.9	3.6	0.8	.688	3.7	0.8	3.6	0.8	3.3	0.9	.216
7. Areas of study were suggested based on the type of care experienced by the student.	3.7	0.8	3.7	0.9	.900	3.7	1.0	3.7	0.8	.392	3.7	0.8	3.7	0.9	.464	3.8	0.8	3.7	0.8	3.6	1.0	.849
8. Instructor taught the student to consider multiple aspects of clinical situations.	3.6	0.8	3.7	0.9	.892	3.6	0.9	3.7	0.8	.693	3.7	0.9	3.7	0.8	.956	3.8	0.9	3.7	0.8	3.5	0.9	.447
9. Instructor evaluated the maternity nursing practice experienced by the student while reviewing it.	3.6	0.8	3.5	0.9	.554	3.5	1.0	3.4	0.8	.471	3.6	0.9	3.5	0.9	.867	3.6	0.9	3.5	0.9	3.3	0.9	.512
10. Instructor shared their own experiences to help the student develop opinions about maternity nursing care.	3.3	0.8	3.2	1.1	.469	3.2	1.2	3.3	0.9	.872	3.2	1.0	3.3	1.0	.746	3.1	0.8	3.3	1.1	3.2	1.1	.526
11. Instructor approved care plans developed by the student.	3.3	0.8	3.2	0.9	.949	3.3	1.0	3.2	0.8	.282	3.3	0.7	3.2	0.9	.589	3.3	0.7	3.3	0.9	3.3	0.9	.981
13. Instructor encouraged implementation of appropriate ideas suggested by the student.	3.4	0.6	3.4	0.9	.971	3.3	0.9	3.4	0.8	.553	3.7	0.7	3.3	0.8	.995	3.4	0.7	3.4	0.9	3.2	0.7	.191
14. Instructor was a good role model as a maternity nursing clinician.	4.0	0.8	3.9	0.9	.888	4.1	0.9	3.8	0.8	.038*	4.0	0.8	3.9	0.9	.134	3.7	0.9	4.0	0.9	4.0	0.9	.200
15. Provided opportunities for student to experience care particular to maternity nursing.	4.0	0.8	4.1	0.8	.738	4.2	0.9	4.0	0.7	.005*	4.1	0.8	4.1	0.8	.871	3.7	0.9	4.1	0.8	4.1	0.8	.014*
16. Provided opportunities for student to implement their nursing skills.	4.0	0.9	4.1	0.8	.793	4.2	0.8	3.9	0.8	.009*	4.1	0.8	4.1	0.8	.844	3.9	0.9	4.1	0.8	4.2	0.9	.306
17. Instructor praised the student's ideas about care and actions.	3.2	0.9	3.3	1.1	.717	3.3	1.2	3.2	0.9	.242	3.4	0.8	3.2	1.1	.878	3.3	0.8	3.3	1.1	3.0	1.1	.254
18. Even if the instructor did not speak, the instructor was nearby to provide support for the student.	3.2	1.1	3.4	1.1	.372	3.5	1.1	3.3	1.0	.169	3.3	1.1	3.4	1.1	.594	3.2	0.9	3.4	1.1	3.3	1.0	.294
19. Instructor valued and dealt with matters the student wanted to learn.	3.5	1.0	3.7	1.0	.337	3.8	1.0	3.5	0.9	.018*	3.6	0.9	3.6	1.0	.522	3.5	0.8	3.7	1.0	3.6	0.9	.441
20. Instructor liaised so the student could work with women having babies, families, nursing staff, and other medical personnel.	3.5	0.9	3.6	0.9	.441	3.5	1.0	3.6	0.8	.751	3.6	1.1	3.6	0.9	.924	3.6	0.8	3.6	1.0	3.4	0.8	.567
21. Instructor provided opportunities for the student to consider maternity and paternity.	3.6	0.6	3.5	0.9	.629	3.3	1.0	3.7	0.7	.013*	3.5	0.9	3.5	0.9	.816	3.5	0.8	3.6	0.8	3.3	1.1	.288
22. Instructor involvement increased the student's interest in maternity nursing care.	3.4	0.8	3.7	0.8	.077	3.6	0.9	3.7	0.8	1.000	3.7	0.9	3.6	0.8	.919	3.6	0.7	3.7	0.9	3.4	0.8	.163
23. Instructor interactions made it easy for the student to ask questions.	3.4	0.7	3.5	1.0	.468	3.7	1.1	3.3	0.8	.005*	3.3	0.9	3.5	1.0	.155	3.5	0.8	3.5	1.0	3.3	1.1	.580
24. The teaching provided by the instructor was suited to the individual personality and abilities of the student.	3.3	0.8	3.3	1.0	.712	3.4	1.1	3.3	0.8	.752	3.3	0.9	3.4	1.0	.579	3.5	0.9	3.3	0.9	3.2	1.1	.483
25. When the student tried to understand the patient's point of view, the instructor provided opportunity to think, 'If it was me ...'	3.3	0.9	3.3	1.0	.990	3.2	1.1	3.4	0.9	.146	3.6	1.1	3.3	1.0	.247	3.4	0.9	3.3	1.0	3.1	1.2	.331
26. Instructor provided opportunities for the student to expand their nursing outlook.	3.7	0.8	3.7	0.9	.522	3.8	0.9	3.7	0.9	.311	3.7	0.9	3.7	0.9	.789	3.7	0.8	3.8	0.9	3.6	0.9	.420

Note. ¹⁾ Mann-Whitney U test. ²⁾ Kruskal Wallis test.

these were items involving "in cooperating a good idea to practice", or "being praised".

Discussion

In this study, it was recognized that there was difference in students' perception in educational background and when the maternity practicum took place in their nursing curriculum. Also, it was recognized that students' perception of instructors respecting them were low. Therefore, the tendency of such perception will be focused in discussing the support for clinical instructors.

1. The contents and composition of Students' Perceptions of Clinical Instructors' Approaches

The students' perceptions of clinical instructors' approaches were evaluated using 25 items which were then analyzed and grouped into three factors. Factor 1 of this study < A supportive approach that deepened student understanding and expanded interest in maternity nursing > was similar to configuration factor of clinical instructors' approach "offering feedback" of Hosoda et al. study¹³⁾ where instructors approach their students to look back and sort out their thoughts and lead to their learning. Lee⁹⁾ and Hosoda et al.¹³⁾ has stated the importance of correlation of the instructor and student was not factorized in this study, but similarity could be seen in item "work with other medical personnel" which is comprised in Factor 1 of this study.

Factor 2 < An instructional approach promoting students to understand the significance of their experience and to think systematically > suggests students to learn from their actual experience of caring, and clinical instructors to support to bring meaning to their experiences. These contents reflects the findings of Pamela¹⁰⁾ and Yokoyama et al.¹⁶⁾, where they stated the importance of supporting the thinking process of clinical practice and value the learned experience of the students.

For the factor 3 < Being a role model and providing the students to experience maternal nursing care > , Nouri JM et al.¹⁷⁾ described the importance of the modeling towards the student's emotional support. On the other hand, Sasaki et al.¹⁸⁾ described that clinical abilities of a student was learnt by copying their instructor, thus the importance of physical model. In this research, instructors' educational approach that students affirmatively perceps, the contents that students answered "think so" were those related to instructors providing opportunities for students to actually perform the nursing care.

The students' perceptions of instructors' approach such as "provided opportunities for the student to consider maternity and paternity", and "increased the student's interest in maternity nursing care" were original to the findings of this study. These were not seen in the Hosoda et al. study¹³⁾ of approaches that clinical instructors perceps, therefore making this finding unique to students' perception. This suggests the usefulness of this scale to understand the students' perception.

2. The tendency of students' perceptions of instructors' approach according to students characteristics

In this research, there was no difference in students' perceptions according to gender. It could be that instructors considered their approach towards male students so that they will not feel the gender difference. However, because maternity nursing practicum targets women during pregnancy, delivery and post-partum, there are many difficulties pointed out for male students to participate. From this, instructors' educational approach in the maternity nursing practicum may not be an approach which could solve such difficulty of this practicum. Itoh et al.¹⁹⁾ states that in maternity nursing practicums, there were concerns about differences in nursing care that male students could do, and worries that the patients will be female close to their age, male students required additional educational attention by teachers. The number of male students studying nursing is increasing in recent years. It is necessary to discuss and consider the educational consideration for gender difference.

For educational background, this study compared students in nursing schools to student in universities. University students' perception of the third factor "role model as a maternity nursing clinician", "Provided experience care particular to maternity nursing", "Provided opportunities for student to implement their nursing skills" were found to be more affirmative. In universities and nursing schools, since educational backgrounds differ, distinct comparison cannot be performed, but compared with nursing schools, the practicum period of students in universities is short, and the opportunities for experience nursing skills are hard to be obtained. Therefore, clinical instructors may have approached the student with clear intention consideration such difference. However, this study only evaluates the students' point of view, so further study is required for integrating the third persons' point of view.

There were no difference in the perception of students with or without employment experience. However, students who have employment experience has strong desire to become a nurse and they have acquired attitude and communication skills as a social member. Hayashi²⁰⁾ states that clinical instructors of maternity nursing practicum tends to teach students to make the most of their experience and also teach them according to their own experience. In this study, students were to answer to how much they percept "Clinical instructors talk of their experience so that the students could image maternity nursing", although there was no difference among students with or without employment experience. The reason behind this may be that the employment experience is difficult to relate to the understanding of maternity nursing. Further study is required to discuss whether clinical instructor has different educational approach when they consider the employment experience of a student.

Considering when the students took part in maternity nursing practicum, there were more items answered as "Think so" in order of middle practicum group, last practicum group, and first practicum group. Students who had maternity nursing practicum first tended to percept less of their clinical instructors' educational approach. Among the students of last practicum group, there were 7 items that were relatively answered as "Think so". Those items were related to how clinical instructors would show how practitioners work and give students the opportunity to experience and practice so that they can image maternity nursing, items that students felt acknowledged and respected by their instructors. Students who have experienced other nursing practicum and took maternity nursing practicum last seemed to percept more of such approaches. Shiraki et al.⁸⁾ states the necessity of praising students or their work. The relation between when the students take part in maternity nursing practicum and how often they were praised cannot be discussed from this study, thus there is a need for further research.

3. Suggestion of clinical teaching according to the perception of students

Suggestion of educational approach a clinical instructor may take, considering the trend of students' perception will be discussed below.

It seems favorable for clinical instructor to teach students considering when during their rotation of nursing practicum that maternity nursing practicum

took place. If the maternity nursing practicum was the first clinical practicum for the students, instructor should approach them so that they can reflect and give meaning to their experience. If the maternity nursing practicum was the last of clinical practicum for the students, clinical instructor should approach the students to make use of the experiences of their past practicum and express and decide on what they want to learn by themselves.

There are 2 points to be discussed when considering the fact that all students answered "Do not think so" to items related to "Imaging of nursing care", "Praise from instructors", and "Being watched over". The first point is that although the instructor may be considering when the students are taking their maternity nursing practicum, students may not be catching such intention from their approach. The second point is that clinical instructor may not have approached the students with such intention. Clinical instructor should consider what students perception when they teach the students. Further study is needed to evaluate how students' perception changes if different approach is made.

Moreover, it seems inevitable that clinical instructors' approach may differ according to the educational background of students. However, whether there is a difference in instructors' approach cannot be stated from this study. Therefore, further study is necessary to discuss on the difference of students' perception according to their educational background and how instructor should approach them.

Limitations of This Study and Future Suggestions

Due to the small sample size and that this study was limited to a specific region in Japan, the findings of this study cannot be generalized. Further studies should evaluate the difference in perception of students' and clinical instructors', and discuss the character of clinical instructors and difference in the environment of clinical practicum.

Conclusions

1. Students' perception of clinical instructors' educational approach consisted of 3 factors based on 25 items. The 3 factors were: 1) A supportive approach that deepened student understanding and expanded interest in maternity nursing. 2) An approach that assigned meaning to the experience, and indicates a learning direction to promote systematic thinking. 3) An approach that provided

opportunities to experience maternity nursing care.

2. Students had little perception of instructors being "Looking after and praising" them.

3. University students were more affirmative in items of factor 3 < Being a role model and providing the students to experience maternal nursing care > than of nursing school students.

4. Among students whose maternity nursing practicum took place in different time of their nursing curriculum, the degree of affirmativeness towards clinical instructors' educational approach was different.

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母性看護実習指導者の教育的アプローチに対する学生の認識 — 認識尺度の構成内容と学生の属性からみた認識傾向 —

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要 旨

【目的】

看護実習は, 学内で学んだ知識, 技術, 態度を看護実践で適用しその能力を養うため, 実習指導者の役割が大きい。しかし実習指導者のアプローチに対する学生の認識は十分に明らかにされていないため, 本研究は指導者のアプローチに対する学生の認識について明らかにすることを目的にした。

【方法】

実習指導者の教育的アプローチに対する学生の認識をセミオープンインタビューで抽出した。その内容を主因子分析により, 構成尺度化して 228 名の学生の認識をみるために横断的質問紙調査を行い統計的に分析した。

【結果】

指導者の教育的アプローチに対する学生の認識は 3 因子で構成され「1. 学生の理解を深める支持的アプローチ」, 「2. 体験の意味づけと系統的思考を促す示唆的アプローチ」, 「3. ケア体験の提供と役割モデル」であった。大学教育課程の学生は専門学校に比べて第 3 因子の認識傾向が肯定的であった。逆に, 指導者から「学生を賞賛したり, 看護ケアをイメージづける」について、「そう思わない」と認識していた。実習の開始時期により指導者のアプローチに対する学生の肯定的認識の高さが異なる傾向があった。

【結論】

1) 実習指導者に対する学生の認識は, 実習で理解を深める支持的アプローチ, 体系的な思考過程ができる示唆的アプローチ, ケア機会の提供とモデリングの 3 因子で構成されていた。2) 学生は指導者から「賞賛する, 見守る」というアプローチが少ないと認識していた。3) 専門学校に比べて大学教育課程の学生は, 第 3 因子<母性看護ケアの機会の提供とモデリング>について有意に肯定的に認識していた。