

The Practical Delivery Room Experience of Nursing Students at Suranaree University of Technology

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Abstract—The purpose of this study was to study the practical delivery room experience of nursing students. The respondents were 6 junior nursing students of Suranaree University of Technology who had a direct experience from practicing in a delivery room between January 9 and March 30, 2012 as part of Nursing Care of the Family and Midwifery 3. The data was collected by using in-depth interview, observation, and reflective report. The results of the study found that the practical delivery room experience of nursing students consisted of three issues: 1) stress and coping with stress during practical exercise, 2) changes in daily routine, and 3) source during practical exercise. The results of this study would lead to the understanding of the meaning of the practical exercise of nursing students.

Keywords—Delivery Room, Practical Experience, Nursing Students.

I. INTRODUCTION

NURSING study consists of both practical and theoretical learning. It requires nursing knowledge to apply in nursing practice. The practicum in a patient unit of nursing students has been considered an important experience for students to apply theoretical knowledge to real situations.

The study of obstetrics nursing provides both theoretical and practical learning. Nursing students must acquire knowledge of maternal and child nursing from ante-partum, intra-partum and postpartum periods. After completing a theoretical course, students must take nursing practice. They also have to prepare knowledge, body, and mind before the practicum, especially the practice in a delivery room, since delivery is an urgent situation; a pregnant mother must get help in delivery in time. This is a new experience for nursing students. There are many factors leading to stress, anxiety, and fear: placement and delivery instrument, adaptation to university supervisor and mentor, nursing care for pregnant woman with intrapartum labor pain, mechanisms of labor and complicated nursing for pregnant woman with complications which requires domain knowledge for the safety of mother and baby^{[1] [2]}. If a nursing student cannot adapt themselves to these changes, it will affect their learning and positive attitude towards the practicum and professional nursing. Therefore, I was interested in studying the practical delivery room experience of nursing students to be aware of their feelings during the practice and be a

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guideline for supporting the practical exercise learning in a delivery room of future nursing students.

II. OBJECTIVE

To study the practical experience in delivery room of nursing students.

III. MATERIAL AND METHODS

A. Study Design

This study was a qualitative research applying phenomenology to understand the meaning, thoughts, feelings, and lived experience of nursing students during their practice in a delivery room.

B. Sample

The sample group was 6 nursing students in the third year of Suranaree University of Technology who had a direct experience from practicing in the delivery rooms of two hospitals – Dan Khun Thot hospital and Chokchai hospital in Nakhon Ratchasima – between January 9 and March 30, 2012. The respondents were selected by using purposive sampling.

C. Study Instruments

The main instrument was the researcher^[3]. Related literatures and the practical delivery room experience of nursing students were reviewed to be a guideline to design questions. The questions for interviewing were open-ended questions. Other instruments were a sound recorder, a note, a pen, etc.

Data collection included in-depth interview following the questions I designed, the observation of the nursing students during the practice in a delivery room, and reflective report. I recorded all data immediately after collecting it day by day.

D. Data Analysis

Colaizzi (1978)^{[3] [4] [5]} was analyzed the data. The steps are as follow:

1. The interviews of the respondents were transcribed and noted down. All of the transcription and reflective report were read to understand the content as a whole.

2. Words, phrases, sentences, and main ideas related to the experience of the nursing students during the practice in the delivery room were extracted from the data collected from the interview transcription and reflective report.

3. Each important statement and phrase found were read line by line and word by word before formulating meaning or coding to the important sentence related to phenomena in the

second step. After that, the formulated or coded statements were recorded.

4. The meanings received from the respondents were reviewed and classified as a cluster of themes to draw the conclusions according to the objectives. This contributed to themes.

5. The conclusions from the analysis were integrated. Then, each of them was described exhaustively according to the objectives and reduced to an essential structure by using the respondents' words to prove that the information was real. It was clear, reliable, and could be verified.

6. The final conclusion was given back to one respondent to read and confirm the information accuracy. This would make the conclusion reliable.

IV. RESULT

From the results of the data analysis, it was found that the informants showed their thoughts, feelings, and actions related to the practical delivery room experience. There were three main issues: A) stress experience and stress coping behavior during the practical exercise, B) changes in daily routine, and C) sources during the practical exercise.

A. Stress Experience and Stress Coping Behavior during the Practical Exercise

It was found that the nursing students thought that the first practical delivery room experience had to be stressful, scary, exciting, and challenging due to both a delivery room environment and various conditions of mothers. Some nursing students had shared their thoughts and feelings, as shown below:

"I was stressed and excited during the practice, but I took it as a positive pressure because most of the deliveries were an emergency case. Even though it's not an emergency case, anything could happen. I always told myself that I had to do my best so that there was no any mistake. After finishing, I might forget some comments and that might get me stressed. But, that also urged me to do things better than before."

"Just knowing that I was going to practice in a delivery room I already got stressed. Well, I was usually scared and anxious of things. When seeing other nurses doing things very quickly, I became stressed because I normally did things pretty slowly. Working in a delivery room needs quickness for mothers' and infants' safety. But, my teachers always encouraged me and relieved my stress."

"My first stress was that I'd never practiced before. When there's a case, I usually did things wrongly, such as forgetting mechanism of labor. I was also stressed about case conference. But lately I can adapt myself and start to learn the process more. My stress is now reduced."

"My first stress was the time I had to practice in a delivery room. I dealt with it by staying calm as long as possible and counting one to ten in my head. If there's a question and I couldn't answer, I would stay calm to pull myself together. When practicing in a delivery room with other nurses and feeling stressed, I would keep my emotions bottled up and stay focused. After finishing my shift, I would get something to do

like listening to music, watching a movie, or calling my parents to express my feelings; that helped relieve my stress."

"One way to cope with stress is to talk with friends; they will give you good advice, encourage you, and help you find a solution to make you feel better. Another way is to rest when you get stressed. When waking up, you can start everything all over again and take every mistake as a lesson. Or, you can bike to get something to eat at a market. If you have to be in a delivery room and be able to manage your stress, then you are happy."

B. Changes in Daily Routine

It was found that the nursing students changed the daily routine of their lives during the practice. It was a different routine from other normal students. Some nursing students shared their thoughts about this:

"Time management was the first change in my routine. Before the practice in a delivery room, we might sleep and eat whenever we want. However, we have to learn to plan our daily life when we are during the practice which has morning, afternoon, and night shifts. The second one is decision. In a normal life we don't have to make any decision, but we have to learn to make a decision when we are in a delivery room because we are in an emergency situation."

"The change I've made is resting time. The normal practice has only morning shift while the practice in a delivery room has morning, afternoon, and night shifts. So, I have to be more responsible. Spending time with other nurses helps me learn how to work and how to live my life differently from the life in the university. In the university, I am comfortable with buses and books, but there I have to adapt myself with situations. If there's a case and I have to work late, I have to properly manage my time for resting, doing homework, and reading."

"My time allocation has changed since the practice in a delivery room because of various shifts. I have to learn to manage both time for resting and working. When working, I can meet my friends less often but have more time for the practice. When meeting my friends, we will care about each other much more."

"Before the practice, we worked from morning to evening and then went to sleep. But when it comes to the practice in a delivery room which has a night shift, my sleep plan has then changed. I have to manage my time properly because I have to rest, read books, and do homework. Even though I can't sleep at my usual time any longer, I still have to learn to be patient. No matter how tired I am, I have to be on shift on time."

"The first difference in my daily routine before the practice in a delivery room is living place. Before that I lived in the university, but now I have to live in a house next to staff members; I have to be courteous. Time allocation for sleeping and doing homework is another thing to be managed. I also have to change from nursing patients to nursing pregnant women who are not painful."

C. Sources during the Practical Exercise

The study found that the nursing students have several sources during the practical exercise, as shown below:

“When I get too stressed, I will look at my supervisor because having her near makes me feel better and helps relieve my stress.”

“I feel warm with my friends. We talk and listen to our problems and share our feelings. Any questions we can't find an answer we will discuss. Friends help us a lot.”

“I am proud to have such a good place to practice with university supervisors and friends who always support me.”

“I normally don't believe in anything if I don't experience it myself. I call my mom sometimes. Once she told me that delivering is not that scary because she gave birth to me before. She told me to concentrate on my study because I almost graduate. It's good to have a support from your family.”

V. DISCUSSION

The study of the practical delivery room experience of 6 nursing students helps gain an understanding of the practical delivery room incident of nursing students, as explained below:

The practical exercise of nursing students is the key for professional nursing education. Nursing students have to prepare themselves both physically and mentally for any environments they may encounter to adapt themselves to changes and experiences properly. If they cannot adapt, they may become stressed and are not happy with their study [1]. The study of Yongphoomphuttha, N. [6] found that the level of happiness of the majority of nursing students towards the practical exercise was fairly low, especially in a delivery room. The practice in a delivery room might cause them stress easily since it was a completely new experience for nursing students. This study found that the students were stressed during the practice because it was their first time of practicing in a delivery room; they had no experience; the room and instruments caused them stress; and they had to adapt themselves to their mentors. This conforms to the study of Namakankham, A [7], which found that 59.81% of nursing students became stressed at middle level while 68.22% said it was very challenging. Her study also found that the factors to their stress were the characteristics of university supervisors, the ways of practicing and nursing patients, the characteristics of personnel in the unit, the place for practicing, and the characteristics of sample groups. From the study of Jumthong, S. [1], it was found that the nursing students of Boromarajonani College of Nursing, Praputhabat, also had stress during the practice in a delivery room. The students had to deal with their stress to be able to adapt themselves to any potential changes. It was found that their stress management was relevant with their existed sources during the practice, i.e. university supervisors, mentors, friends, and families. These sources are considered to be a main part of their ability to adapt during the practice and be able to deal with stress properly. Moreover, adapting takes time and needs practices. If a student can

perform various activities and continuously improve themselves, it will help reduce their stress during the practice.

During the practice in a delivery room of nursing students, the results of the study reflected the changes in the students' daily routine – working the afternoon and night shifts. The students had to manage their time for reviewing their lessons, writing reports, and working shifts. Furthermore, these changes affected their sleep and eating time. The mentioned situations happen to all nurses; It will help them learn to manage their time and enter this profession easier. In addition, during the practice the students learned to live with others, especially friends in the group who always helped each other, such as working shifts and chatting. The help from the friends in the group was considered as another source for the students during the practice; it gave them warmth and helped them work happily.

The results of the study also found that there were other crucial sources for nursing students: university mentors who provide knowledge and advice to nursing students during their practice in order to encourage them and relieve their stress, mentors who show nursing students the working process in a hospital and other useful skills, and family who always encourages them and supports money for them during the practice. It is obvious that the practical exercise in a delivery room needs adaptation and learning things around them in order to deal with stress during the practice properly.

VI. CONCLUSION

The results of the study found that the practical delivery room experience of nursing students consisted of three issues: 1) stress and coping with stress during practical exercise, 2) changes in daily routine, and 3) source during practical exercise. The results of this study would lead to the understanding of the meaning of the practical exercise of nursing students. Moreover, it would help improve practical instructional model of labor room and be basic information for further research.

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REFERENCES

- [1] Jumthong, S., et al. (2009). Experience of Stress and Coping in Clinical Learning at Delivery room of Nursing students. *Journal of Behavioral Sciences*. 15(1), 39-55.
- [2] Wattananon, Y., Jitima, V., and Wanasatit, W., (2010). The relationship between readiness factors of nursing student and practices achievement on normal delivery care. *Journal of Nursing Science*. (Supplement). 28(4), 67-73.
- [3] Streubert, H. J., and Carpenter, D. R., (2007). *Qualitative Research in Nursing*. 4th ed. Lippincott Williams & Wilkins.
- [4] Pu, S., and Sodmanee, A. (2007). *Basic Qualitative Research*. Bangkok: Institute of Behavioral Science, Srinakharinwirot University.
- [5] Intrakumhang, A. (2008). Research synthesis of Stress and Coping of Thai people. *Journal of Behavioral Sciences*. 14(1), 135-150.
- [6] Yongphoomphuttha, N. (2000). Relationship of student factors, Attribute of Preceptors, Clinical environment and Happiness Learning in

Clinical practice of Nursing student, Boromarajonnani College of Nursing, Ministry of Public Health. Thesis of Master degree in Nursing Education, Graduate School, Chulalongkorn University.

- [7] Namakankham, A., Suvanayos, C., Pakpoom, P., and Poomcoom, V. (2008). Stress and factors inducing stress in nursing students during nursing practice on wards. *Nursing Journal*. 35(2), 26-36.

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