

A qualitative investigation into the lived experiences of newly graduated midwives during their transition period in Erbil

Paywand Safeen Naqshbandi 1, Muaf Abdulla Karim 23*

¹ BSc N, MSc in Maternity Nursing, Erbil Polytechnic University, the Kurdistan Region of Iraq
² BSc N, MSc N, PhD Nursing, College of Nursing, Al-Kitab University, Iraq.
³ BSc N, MSc N, PhD Nursing, Director of Continuous Professional Development, General Directorate of Erbil-Health, Ministry of Health, Kurdistan Region-Iraq.

Midwifery can be a stressful profession for newly graduated midwives because of the increasing rate of childbirth and the demanding environment of maternity departments. New graduate midwives are provided with a transition period program right after their graduation, which can have a significant effect on their future career. The present study was carried out in order to find out the newly graduate midwives' feelings, concerns, and needs through their lived experiences during their transition period in the Maternity Hospital of Erbil, the Kurdistan Region of Iraq. The present investigation was a qualitative phenomenological study in which the required data were collected through semi-structured in-depth interviews with 15 new graduate female midwives who participated in their transition period in Maternity Hospital of Erbil during December to April 2018. The collected data were analyzed by Van Manen's method. Analyzing the collected data led to emergence of four main themes namely difficulty to gain confidence", "supportive environment and colleagues", "difficulty to adapt to the demanding environment", and "decision to quit midwifery profession It was concluded that providing the newly graduated midwives with supportive environments and helping colleagues can help them obtain sufficient confidence in order to put their theoretical knowledge into practice, stay in the profession, and become professional midwives in the future.

Keywords: newly graduated midwives, qualitative study, lived experience, inductive content analysis method

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Introduction

In order for newly graduated midwives to become professional practitioners, they are provided with an educational-practical program in hospitals and clinics during education and after graduation, which is called transition period [1, 2]. The philosophy behind this period is to give the new graduate midwives the opportunity to put the knowledge they have learned during their education into practice, which is claimed to be stressful because the novice midwives have to take on new responsibilities in a challenging environment [3]. Transition period has also been reported to be associated with feelings of insecurity, nervousness, and inadequacy which can have a negative impact

on the performance of the newly graduated practitioners [4:5]. Moreover, new midwives have to be flexible and adapt themselves to the new environment which requires them to get involved with different relationships [6]. In addition, since the new graduate midwives are not sure about their roles in the new unfamiliar environment, their adaptability might be negatively influenced [7, 8].

The increasing birth rate all over the world has led to burnout and stress among midwives particularly the newly graduated ones [9], and this condition results in a remarkable drop in their emotional wellbeing which is defined as experiencing meaningful life, working productively, and coping with daily stresses [10]. Research has indicated that the midwives' wellbeing can have a direct influence on the quality and safety of the women at labor and the newborns [11]. Moreover,

Corresponding author: Muaf Abdulla Karim, College of Nursing, Al-Kitab University, Iraq. Email: muafabdulla82@uoalkitab.edu.iq,

distressed midwives cannot function well and make right decisions [12].

Right after graduation and during transition period, new midwives are normally enthusiastic to promote their personal and professional skills and enhance their confidence in order to be able to take on new responsibilities and roles as professional midwives [13]. In addition to theoretical knowledge, confidence has been referred to as an important attribute that newly graduated midwives need to be equipped with in order to enable them to make right decisions in practice [14]. Research has also suggested that the new midwives' decisionmaking capacities and in turn their self-confidence can be hindered and suppressed by the working environments in which new midwives are not supported to make decisions and are obliged to follow all directions given by senior midwives [15].

As revealed by the findings of different investigations, providing newly graduated midwives with well-structured support programs during their transition period can help them develop and promote their confidence and thus provide their clients with better midwifery services [16-18]. Moreover, meaningful relationships, support, social connections, and trust provided by the working environments can help new graduates develop their practical skills more vigorously [19]. It is also reported that new practitioners can experience job satisfaction and retention as a result of effective transition period programs, while they can face attrition if the transition period programs are not supportive enough [20].

Although most of the studies have referred to the importance of supportive environments during transition period in creating highly qualified professional midwives, none of them have referred to the elements of such environments. Moreover, very few studies have focused on the lived experience of newly graduated midwives in order to come up with deeper understanding of their needs, perceptions, concerns, and issues during transition period which can have a direct effect on their future career as midwives. In this regard, the present qualitative study, which was carried out in Soran District, the Kurdistan Region of Iraq, was aimed at analyzing the lived experiences of newly graduated midwives during their transition period in order understand the needs, feelings, perceptions, and concerns

Materials and Methods

Study design and setting: The present investigation was a qualitative phenomenological

study that was carried out on newly graduated midwives in maternity departments and clinics located in Erbil, the Kurdistan Region of Iraq from December to April 2018.

Participants: The statistical population of the present study included all the midwives who newly graduated and received their diplomas from Erbil Polytechnic Institute located in Erbil, the Kurdistan Region of Iraq. The study sample consisted of 15 new graduated female midwives who were participating in the transition period program held by Erbil Polytechnic Institute in Maternity Hospital of Erbil, the Kurdistan Region of Iraq. The participants were chosen by a convenience sampling method based on the inclusion criteria which were being a new midwife graduated from Erbil Polytechnic Institute and willingness to participate in the study.

Data collection: Due to the complicated nature of lived experiences, the required data were collected through semi-structured in-depth interview which is proposed as an efficient method to collect data in the phenomenological approach [21]. The interviews were carried out and directed through open-ended questions ranging from general to specific questions in order to come up with deeper understanding of and insight into the newly graduated midwives' experiences. All interviews were conducted in the participants' mother tongue (i.e. Kurdish), which were later translated into English by an expert translator

Data analysis: As suggested by research studies, in order to analyze qualitative data and reach a high level of abstraction, hermeneutic approaches such as the one proposed by Van Manen are commonly utilized [22]. Accordingly, the qualitative data collected on the lived experiences of the newly graduated midwives in the present study were analyzed through the six methodological steps proposed by Van Manen's method (1990). These 6 methodological steps are "Approaching the nature of lived experience", "Investigating experience as it is lived", "Extracting essential themes which describe phenomenon", "Describing the phenomenon through writing and rewriting", "Maintaining a strong and orientated relation to the phenomenon", and "Balancing the research context by considering the parts and the whole"

Trustworthiness: In order to ensure and maintain the rigor of the study, Lincoln and Guba's four-criterion gold standard that consists of credibility, dependability, conformability, and transferability was utilized [23]. In addition, the credibility of the findings was ensured through the

researcher's prolonged engagement with the data, referral to Maternity Hospital of Erbil to communicate with the participants effectively, and utilization of the member- and peer-checking techniques as suggested by Devadas (2016) [24]. Moreover, given the researcher's experience in a midwifery profession, her credibility was also achieved.

Ethical considerations: In order to regard the ethical considerations, the present study was ethically approved by the Ethics Committee Polytechnic University, Erbil, the Kurdistan Region of Iraq. Moreover, before the final participants were chosen, the participants were provided with thorough explanation about the study's objectives, data collection method, and confidentiality of their information, and their right to quit the study at any stage. Also, informed consent to participate and recording of the interviews was obtained from the participants. Finally, each participant was given a unique code (Midwife 1, Midwife 2, etc.) so as to keep the collected data anonymous, and in order to take the confidentiality issues into account, the files containing their data were kept in a safe place.

Results

Thematic analysis of the transcripts through Van Manen's method led to appearance of three main themes namely "difficulty to gain confidence", "supportive environment and colleagues", "difficulty to adapt to the demanding environment", and "decision to quit midwifery profession"

Difficulty to gain confidence

The first theme that was referred by most of the participants was the fact that they had a hard time acquiring self-confidence while carrying out the responsibilities they had been given. While relating their lived experiences, the participants referred to their hard time implementing theoretical knowledge into practice, which made confidence gaining difficult. In this regard, Midwife 3 stated:

"The first days of the transition period were really difficult, I could easily remember whatever I had learned during my education in the institute, but it was difficult to put them in practice. I think that I didn't have enough self-confidence to carry out the responsibilities. However, I feel I'm progressing little by little because the maternity department has a helpful interactive environment and I have been able to attract my colleagues and the women's trust that I can carry out the job well."

Midwife 8 also revealed her lack of confidence while performing midwifery responsibilities and stated:

"I was a top student and could pass all my courses with A scores, but I don't think I'm confident enough to put what I've learned into practice, but I'm sure I can get sufficient confidence by practicing every day and ask my coworkers for help and advice."

Difficulty to gain and develop confidence was also pointed out by Midwife 11 who said:

"I'm hardly sure if I'm doing the work correctly or not, I feel I don't have sufficient self-confidence. Although I'm sure about the theoretical knowledge about the ongoing tasks in the department, but I cannot accomplish them confidently."

Regarding the first theme, Midwife 12 said:

"My confidence is better than the first week I started the transition period, but I still need to get more confident to be able to accomplish the midwifery responsibilities."

Supportive environment and colleagues

Availability of supportive environment and colleagues was the second theme that emerged out of the midwives' lived experiences. In this regard, most of the midwives referred to the fact that the environment of the maternity department and their co-workers were supportive, which helped them fell less stressed out. In this regard, Midwife 1 related:

"Working as a midwife, especially in the beginning, is quite difficult and stressful. I was really stressed out in the beginning of the transition period, but my experienced colleagues helped my get over my stress, and now I feel emotionally better."

Midwife 5 also referred to her supportive colleagues and said:

"I'm quite new here and I have no practical experience, but my colleagues help me a lot. They are so supportive and helpful, and I really appreciate their help and support."

Supportive environment was highlighted by Midwife 14 who revealed:

"The maternity department is a highly supportive environment, particularly for the new graduate midwives. In the beginning of the transition period, I felt stressed out, but after seeing the supportive environment, I felt less tense."

Regarding supportive environment and colleagues, Midwife 15 revealed:

"The supportive environment and helping colleagues have helped me a lot, and I feel I can handle the responsibilities well."

Difficulty to adapt to the demanding environment

All of the participants referred to the fact that midwifery is a demanding profession and that it is difficult to adapt to the environment which requires the individuals to carry out different responsibilities dynamically. In this regard, Midwife 2 said:

"Midwifery is a highly demanding profession, and working as a midwife requires a high level of flexibility and adaptability. That's why I sometimes feel that it is difficult for me to get adapted to the environment, but I'm hopeful to learn the ropes quickly."

In this regard, Midwife 7 related:

"There are a large number of women in the maternity department every day, so we need to be very hardworking, and for me as a new graduate midwife, it is kind of hard to adapt to this highly demanding environment."

Midwife 10 also referred to numerous responsibilities in the maternity department and stated:

"It is sometimes difficult to get adapted to the working environment because it is highly demanding and you need to be very flexible."

Decision to quit midwifery profession

Analyzing the transcript of the interviews revealed that some of the midwives decided to quit their career due to the difficulty of the profession and responsibilities it brings about. This theme was labeled as "decision to quit midwifery profession". In this regard, Midwife 4 related:

"As a student, I was always interested in my field of study, but in the beginning of the transition period, I felt disinterested due to the difficulty of the profession and its responsibilities, but little by little, I learned how to survive and function well in this environment, so my attitude has changed, and I want to stay in the profession."

Losing interest in the beginning of the transition period was also referred to by Midwife 6 who stated:

"During the first week of the transition period, I wanted to quit the midwifery profession more than three times, but my friendly co-workers and their encouragement changed my mind, but I still need to learn a lot in practice."

Midwife 9 revealed her concerns about her future in midwifery profession and referred to her decision to quit it.:

"I was an average student, but I was always eager to learn more, but during this transition period, I have found midwifery so difficult and highly demanding. I want to quit, but I'm not quite sure. I guess if I can seek more help and advice from my colleagues, my attitude will change."

Encouragement provided by the colleagues and relatives was referred to as an important factor affecting the newly graduated midwives' decision to stay in the profession. In this regard, Midwife 13 said:

"During the first week of the transition period, I considered quitting the profession many times, I was quite unsure about my stay. But after two weeks, as a result of my colleagues' help and relatives' advice, I'm now sure that I will stay in the profession and try my hard to become a professional midwife."

Discussion

The results of thematic analysis of the interview transcripts in the present study led to emergence of four main themes namely "difficulty to gain confidence", "supportive environment and colleagues", "difficulty to adapt to the demanding environment", and "decision to quit midwifery profession".

The new graduate midwives stated that they had a hard time obtaining confidence while conducting the midwifery tasks and putting the knowledge they had acquired during their education into practice during their transition period. In their study, Mirzakhani and Shorab (2015) reported that the supervisors in maternity clinics believed that the level of confidence among the new midwives was unacceptable, which is in agreement with the first theme of the present study. However, the newly graduated midwives who participated in their study assessed their self-confidence acceptable, which is not in agreement with the first theme of the current study [25]. A similar finding was also reported by Davis et al. (2011) who pointed out that the new graduate midwives had a low level of confidence which improved as a result of their daily practice and involvement with ongoing responsibilities and tasks [26].

The new graduate midwives in the present study pointed out that their self-confidence improved as a result of the helpful interactive environment of the maternity department and the trust between the old and new midwives and staff. Similarly, Cummins et al. (2015) reported that the novice midwives could improve their confidence by establishing trustworthy relationship with the clients and the personnel [27].

The second theme of the present study was supportive environment and colleagues. The new graduate midwives in the present study referred to the help and advice they received from their colleagues and other midwives, which relieved their stress and improved their wellbeing. This finding is in agreement with those of the studies carried out by Hussein et al. (2017) and Fenkwich et al. (2012) who held that providing novice midwives with a supportive environment and relationships can lead to a significant decrease in their stress and anxiety and a remarkable increase in their wellbeing and confidence [28, 29].

According to the results of the present study, it was observed that the newly graduated midwives had a hard time adapting themselves to the demanding working environment of midwifery profession. Part of this difficulty was contributed to the large number of clients in the maternity department. This finding is in agreement with that of the study carried out by Clements et al. (2013) who carried out a descriptive qualitative study in Australia to describe expectations and experiences of graduate midwives during their transition to practice and reported that the midwifery working environment was considered to be difficult to adapt to and cope with by the participating midwives due to their new responsibilities [30]. In order to help new graduate midwives adapt to the new environment and come over their anxiety and improve their practical skills, Clements et al. (2013) and Cummins et al. (2015) suggested midwifery continuity of care model to be implemented during transition periods [27, 30].

The final theme appeared from analyzing the interview transcripts was decision to quit midwifery profession which was mentioned by some of the midwives. Three of the midwives referred to the change in their decision to quit midwifery profession as a result of the supportive environment and colleagues during the first weeks of their transition period. Another midwife referred to the positive effect that seeking help and advice from co-workers could have on her decision to quit or stay. This finding is in line with that of the study carried out by Clements (2012) who reported that 2 midwives with bachelor's

degree (11.8) and 11 with postgraduate degrees (17.5%) had left their profession as a midwife during their transition yea; however, the reasons for the midwives' departure were not mentioned. In their study, Sullivan et al. (2011) pointed out that helping new midwives gain self-confidence and job satisfaction during their transition period has a remarkable effect on their stay in the profession [32].

Conclusion

The results of the present study indicated that the main concerns of the newly graduated midwives were their lack of confidence, difficulty to adapt to the new environment and responsibilities, and decision to quit or stay in the profession. All these concerns, as was revealed by the results and supported by previous studies, can be relieved if the new midwives are provided with supportive environments and helping colleagues during their transition period. Within such an environment, they will more likely to stay in the profession and become professional midwives in the future. Therefore, midwifery departments are recommended to design and implement supportive transition programs in order to educate confident professional midwives

Conflicts of interest

None

References

- 1. Barkley, A. Ideals, expectations and reality: Challenges for student midwives. British Journal of Midwifery, 2011;19(4): 259-64.
- 2. Levett-Jones, T., Fahy, K., Parsons, K., & Mitchell, A. Enhancing nursing students' clinical placement experiences: A quality improvement project. Contemporary Nurse, 2006;23(1): 58-71.
- 3. Newton, J. M., & McKenna, L. The transitional journey through the graduate year: A focus group study. International Journal of Nursing Studies, 2007;44(7):1231-37.
- 4. Duchscher, J. E. B. Transition shock: the initial stage of role adaptation for newly graduated Registered Nurses. Journal of Advanced Nursing, 2009;65(5):1103-13.
- 5. Wakefield, E. Is your graduate nurse suffering from transition shock? Journal of Perioperative Nursing, 2018;31(1):47-9.
- 6. Dixon, L., Calvert, S., Tumilty, E., Kensington, M., Gray, E., Lennox, S., Pairman, S. Supporting New Zealand graduate midwives to stay in the profession: An evaluation of the Midwifery First

- Year of Practice programme. Midwifery,2015;31(6):633.39.
- 7. Avis M., Mallik M., & Fraser D. M. 'Practising under your own pin' a description of the transition experiences of newly qualified midwives. Journal of Nursing Management, 2013;21(8):1061-71
- 8. Hughes A. J., & Fraser D. M. SINK or SWIM': the experience of newly qualified midwives in England. Midwifery 2011;27(3):382-6.
- 9. Yoshida, Y., & Sandall, J. Occupational burnout and work factors in community and hospital midwives: a survey analysis. Midwifery 2013;29(8):921-6.
- 10. Coyle D, Thieme A, Linehan C, Balaam M, Wallace J, Lindley S. Emotional well-being. International Journal Human-Computer Studies 2014;72(8-9):627-8.
- 11. Pezaro, S. The case for developing an online intervention to support midwives in work-related psychological distress. British Journal of Midwifery, 2016;24(11):799-805
- 12. Beaumont, E., Durkin, M., Hollins Martin, C. J., & Carson, J. Compassion for others, self-compassion, quality of life and mental well-being measures and their association with compassion fatigue and burnout in student midwives: a quantitative survey. Midwifery, 2016;34:239-44.
- 13. Barry, M. J., Hauck, Y. L., O'Donoghue, T., & Clarke, S. Newly-graduated midwives transcending barriers: Mechanisms for putting plans into actions. Midwifery, 2014;30(8):962-67.
- 14. Gerrish, K. (). Still, fumbling along? A comparative study of the newly qualified nurse's perception of the transition from student to qualified nurse. Journal of Advanced Nursing, 2000;32(2): 473-480.
- 15. Martin, C. J. H., & Bull, P. (). Does status have more influence than education on the decisions midwives make? Clinical Effectiveness in Nursing,2004;8(3):133-39.
- 16. Kelly, J., & Watson, R. (2015). An integrative review of the literature on the teaching of the history of nursing in pre-registration adult nursing education in the UK. Nurse Education Today, 2015;35(2): 360-365.
- 17. Davis, D., Foureur, M., Clements, V., Brodie, P., & Herbison, P. The self reported confidence of newly graduated midwives before and after their first year of practice in Sydney, Australia. Women and Birth, 2011;25(3): 1-10.
- 18. Andrew, N., McGuinness, C., Reid, G., & Corcoran, T. Greater than the sum of its parts: transition into the first year of undergraduate nursing. Nurse Education in Practice, 2009;9(1):13-21

- 19. Kelly, J., & McAllister, M. Lessons students and new graduates could teach: a phenomenological study that reveals insights on the essence of building a supportive learning culture through preceptorship. (Report). Contemporary Nurse, 2013;44(2): 170.7
- 20. Crow, S. M., & Hartman, S. J.. Nurse attrition as a process. The Health Care Manager, 2005;24(3): 276.83
- 21. Polit DF, Beck CT. Nursing research, principles and methods. 7th Ed. Philadelphia, PA: Lippincott, Williams & Wilkins; 2004.
- 22. Gibson F, Shipway L, Aldiss S, Hawkins J, King W, Parr M, et al. Exploring the work of nurses who administer chemotherapy to children and young people. Eur J Oncol Nurs. 2013;17(1):59-69.
- 23. Shenton, A. K.. Strategies for ensuring trustworthiness in qualitative research projects. Education for Information. 2004;22:63-75.
- 24. Devadas B. A Critical Review of Qualitative Research Methods in Evaluating Nursing Curriculum Models: Implication for Nursing Education in the Arab World. Journal of Education and Practice. 2016;7(7):119-26
- 25 Mirzakhani, K., & Shorab, N. J.. Study of the self-confidence of midwifery graduates from Mashhad College of nursing and midwifery in fulfilling clinical skills. Electronic physician, 2015;7(5):1284-9.
- 26. Davis, D., Foureur, M., Clements, V., Brodie, P. & Herbison, P. The self reported confidence of newly graduated midwives before and after their first year of practice in Sydney, Australia', Women and Birth, 2012; 25(3): 1-10.
- 27. Cummins, A.M.; Denney-Wilson, E.; & Homer, C. S. E. The experiences of new graduate midwives working in midwifery continuity of care models in Australia. Midwifery, 2015; 31(4):438-44.
- 28. Hussein R, Everett B, Ramjan LM, Hu W, Salamonson Y. New graduate nurses' experiences in a clinical specialty: a follow up study of newcomer perceptions of transitional support. BMC Nursing. 2017; 16(42): 1-9.
- 29. Fenwick, J., Hammond, A., Raymond, J., Smith, R., gray, J., Foureur, M., Homer, C. & Symon, A.. Surviving, not thriving: a qualitative study of newly qualified midwives. Journal of Clinical Nursing, 2012;21(13-14): 2054-63
- 30. Clements V, Davis D, Fenwick JH. Continuity of care: supporting new graduates to grow into confident practitioners. Int J Childbirth. 2013;3(1): 3–12.

- 31. Clements V. New graduate midwives' experiences of their transition support programs. Thesis MMid(Res) University of Technology, Sydney, Faculty of Nursing, 2012.
- 32. Sullivan K, Lock L, Homer CS. Factors that contribute to midwives staying in midwifery: A study in one area health service in New South Wales, Australia. Midwifery. 2011;27(3):331-5.