

Assessment of Student Nurses' Expectations and Satisfaction Before and After Attending Delivery Room

Thesis

Submitted for Partial Fulfillment of the Master Degree in
Maternal and Gynecological Health Nursing

By

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2016

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2016**



بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

وقل زدني علماً

صدق الله العظيم

سورة طه (آية ١١٤)



Acknowledgement

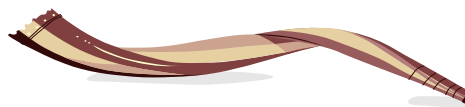
First and foremost, I will feel always indebted to Allah, the most kind and most merciful.

I would like to express my sincere thanks and deepest appreciation to Prof. Dr. Kamilia Ragab Abou Shabana, Professor of Maternity & Gynecological Health Nursing, Faculty of Nursing, Ain Shams University, for her continuous meticulous supervision, prudent guidance, support and unlimited help throughout this work.

I would like to express my deep thanks and appreciation to Dr. Amal Talaat Abd Elwahed, Lecturer of Maternity & Gynecological Health Nursing, Ain Shams University, for her guidance, fruitful comments and unlimited time and efforts to complete this work.

Words cannot express my thanks, gratefulness, respect and love to my Parents and special my husband, without their help, support, patience and encouragement; I would have never achieved any success.

Samia Gamal Gouda



Contents

Items	Page No
List of Tables	I
List of Figures	III
Abstract	IV
Introduction	1
Aim of the Study	4
Review of Literature	5
Chapter I: Labour	
1. Concept of labour	5
2. Physiological changes during labour	6
3. Emotional and psychological changes during labour	11
4. Signs of normal labour	11
5. Stages of labour	14
Chapter II: Student nurse expectation and satisfaction during labour	
1. Concept of expectation	22
2. Student nurse satisfaction regarding attending labor process	24
3. Positive impacts of nursing students participation in laboring women care	25
4. Negative impacts of nursing students participation in laboring women care	27
Chapter III: Student Nurse Role to promote maternal/ fetal and neonatal wellbeing during labor	
1. Nurse as health care provider during labor	29
2. Nurse as health educator and counselor during labor	48
3. Nurse as administrator	58
4. Nurse as researcher	59

Contents (Cont.....)

Subjects and Methods	60
Results	66
Discussion	90
Conclusion	101
Recommendations	102
Summary	103
References	109
Appendix	--
Arabic Summary	١

List of Tables in Results

Tables No.	Title	Page No.
1.	Frequency distribution among student nurses according to their general characteristics (n=150)	66
2.	Frequency distribution among the students nurses related to their expectations before and after attending delivery room during first stage (n=150)	69
3.	Frequency distribution among the students nurses expectation before and after attending delivery room during 2nd stage (n=150)	71
4.	Frequency distribution among the students nurses expectation before and after attending delivery room during 3rd stage (n=150)	73
5.	Frequency distribution among the students nurses expectation regarding their relation with mothers before and after attending delivery room (n=150)	75
6.	Frequency distribution among the students nurses expectation regarding immediate neonatal care before and after attending delivery room (n=150)	77
7.	Frequency distribution among the students nurses expectation regarding infection control practice before and after attending for delivery room (n=150)	78
8.	Frequency distribution among the students nurses expectation regarding safe environment at the delivery room before and after attending delivery room (n=150)	79
9.	Frequency distribution among the students nurses expectation regarding hospital discharge information before and after attending delivery room (n=150)	80
10.	Total positive and negative frequency distribution concerning students nurses expectation regarding mothers and neonatal care before and after attending delivery room (n=150)	82

List of Tables (Cont...)

Tables No.	Title	Page No.
11.	Relation between Student expectation regarding care for mother and their newborn infant after admission for delivery room and their socio demographic characteristics	83
12.	Frequency distribution regarding student nurse satisfaction concerning safe environment at delivery room (n=150)	84
13.	Frequency distribution regarding student nurse satisfaction concerning safety measures at delivery room (n=150)	85
14.	Frequency distribution regarding student nurse satisfaction concerning belonging after attending delivery room (n=150)	86
15.	Frequency distribution regarding student nurse satisfaction concerning respecting among students nurses (n=150)	87
16.	Frequency distribution regarding student nurse satisfaction concerning identity after attending delivery room (n=150)	88
17.	Relation between degree of Student satisfaction regarding care for mother and their newborn infant after admission for delivery room and their socio demographic characteristics	89

List of Figures in Review

Figure No	Title	Page No
1	Different breastfeeding positions	51
2	Preineal hygiene	52

List of Figures in Results

Figure No	Title	Page No
1	Percent distribution of study subjects according to their gender	67
2	Percent distribution of study subjects according to their marital status	67
3	Percent distribution of study subjects according to their residence area	68
4	Distribution of study subjects according to their qualification	68

ABSTRACT

Aim: To assess student nursing expectations and satisfaction before and after attending Delivery room (D.R). **Methods:** A descriptive study design was used. **Setting:** At the delivery unit at Ain Shams Maternity University Hospital. **Sample type:** Convenient sample which included all student nurses at third academic year. **Sample size:** The study sample was composed of 150 students who were attending the previous mentioned setting. **Tool:** Interview questionnaire sheet was used to collect study data. **Results:** Regarding students expectations more than two third of students expected to be welcomed from mothers ,and around half of students expected that nurses following the principle of infection control ,that nurses instructed women regarding bearing down and less than two thirds were satisfied with the presence of safety measures at D.R. **Conclusion:** Regarding student experience results shows that all students expectation came true as students experience exceeded their expectations to the majors regards to mother welcoming ,to make the half regarding infection control ,bearing down, Students were satisfied with their clinical achievements after attending delivery room. **Recommendations:** Student orientation programs pre attending delivery room included causes of students fears, anxiety from attending delivery room and increase training through simulators, videos and integration of nursing ethics to promote women's rights during child birth.

Keywords: Delivery Room (DR), Student nurse expectation, Satisfaction.

Introduction

Labor was defined as a series of events by which uterine contractions and abdominal pressure expel a fetus and placenta from the uterus. Additionally labor and birth were unique events, requiring a woman to employ all the psychological and physical coping methods she had available (**Archie & Roman, 2013**). Delivery room was the heart of the maternity ward and it was important to provide a safe and supportive environment for the mother and baby during delivery In order to do so treatment is administered by professional and experienced team of midwives and physicians from the department of Obstetrics and Gynecology. Birth is a natural process, however there are cases in which there is a need for rapid medical intervention in order to avoid danger to the mother or baby. The delivery room is equipped with all the necessary equipment to which the mother may be transferred to within minutes (**Aguirre & Chou, 2011**).

Meanwhile, expectations were defined as the feeling that something was about to happen, students had high expectations for their active involvement in intra partum care and tend to under-estimate the sense of altruism that motivates women to allow student participation. Women

have low expectations of levels of student participation in their care, but are over all quit satisfied with the skills of the students. These differences high light the need for the development of educational objectives that clarify student roles in the clinical clerk ships and the process of informed consent for student participation (**Gannon et al., 2011**).

Also, the study of obstetric nursing provides both theoretical and practical learning. Nursing students must acquire knowledge of maternal and child nursing from ante-partum, intra-partum to post-partum periods. The students also had to prepare knowledge, body and mind before the practicum, especially the practice in a delivery room, since delivery was an urgent situation, a delivering women must get help in time (**Junthong et al., 2011**).

Meanwhile, many factors were shaping the new experience for nursing students, such as the stress, anxiety, fear of placement and delivery instrument, adaptation to university supervisor and mentor, nursing care for pregnant women with intra-partum labor pain, mechanisms of labor and complicated nursing for pregnant women with complications which requires domain knowledge for the safety mother and baby. If a nursing student couldn't adapt themselves to these changes, it would affect their learning

and positive attitude towards the practicum and professional nursing (**Wattananon et al., 2012**).

Additionally, in many recent studies there were several factors influence the student satisfaction these include clinical and safe environment especially available and adequate equipment and supplies good ventilation at delivery room, good lighting at delivery room, students and clinical instructors (**Serna and Anna, 2013**).

Significance of the study:

There were rare studies that assess student nurses expectations and satisfaction before and after attending delivery room. No previous study was conducted at maternal & Gynecological health nursing department at Faculty of Nursing, Ain Shams University assessing student nurses expectations and satisfaction before and after attending delivery room, to improve learning objectives of educational curriculum and to explore student satisfaction and learning process.

Aim of the Study

The aim of this study was to assess student nurses' expectations and satisfaction before and after attending delivery room.

Research Questions

- What was the student nurses' expectations before and after attending delivery room?
- What was the student satisfaction after attending delivery room?

Chapter (I)

Labour

Labour is defined as series of events by which uterine contractions and abdominal pressure expel a fetus and placenta from the uterus. Regular contractions lead to progressive dilatation of the cervix and create sufficient muscular uterine force to allow a baby to be pushed out into the extra uterine world. Labour represents a time of change as it is both an ending and a beginning for the woman, her fetus, and her family (**Archie & Roman, 2013**).

Labor may be started spontaneously or artificially induced, women must be able to move about freely throughout labor, not be confined to bed, women should receive continuous support from a caring support person during labor, no interventions such as intravenous fluid must be used routinely, women should be allowed to assume a non supine position such as upright and side lying for birth, mother and baby should be housed together after the birth with unlimited opportunity for breastfeeding (**Amis, 2010**).

It is reported that labour and birth are unique events, requiring a woman to employ all the psychological and