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TITLE PAGE

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From a rabbit in the headlights to a confident user of research evidence: A student and teacher story of closing the practice-theory gap

The Nursing and Midwifery council requires midwives and nurses to use evidence in their practice (NMC, 2009, 2015). But what does this *mean*? It is not about blindly applying research findings (Wickham, 1999), instead evidence based practice (EBP) includes the practitioner's expertise, the values of the person at the centre of the care AND the best research findings (Sackett et al. 2000). This leads to midwives and student midwives needing to be able to recognise and apply the best research evidence (Rees, 2011). Rachel had referred to research evidence in her academic essays and practice portfolio throughout her previous two years and she had discussed findings such as those from the Birthplace Study (NPEU) with her mentors. However Rachel's third year module meant that must now fully engage with assessing what is meant by *best* research evidence. She was required to write a 5000 word essay synthesising five published research papers (including qualitative and quantitative studies), which all related to breastfeeding. Rachel was expected to prepare to become a well-informed supporter of breastfeeding by demonstrating that she could critically examine some research into breastfeeding. She had to demonstrate that she could analyse the concept of evidence-based practice, understand midwifery research practice, evaluate different research methods and analyse the practical and ethical aspects of health care research, whilst also revising her knowledge of breastfeeding.

In this paper student midwife Rachel and her teacher Susanne tell the story of Rachel's journey through her 'research module'. The story aims to offer hope to students and teachers about engaging with research evidence for safe and effective practice.

Susanne:

It was the beginning of Year 3 and our students were going to have to really get to grips with understanding research papers to practice in an evidence-informed way. As an experienced midwife and teacher I am passionate about closing the practice-theory gap whereby student midwives' practice might be based on tradition, which sometimes clashed with best research (Armstrong, 2009; Wilson, 2008). But I knew that 'research' was often a word that struck fear into the hearts of student midwives who far preferred learning about the *practice* of suturing perineums, helping women to breastfeed and caring for women in labour. Practice was 'Queen' and theory was that stuff over there in the ivory tower! However, it was my job to get Rachel and her peers to at least appreciate the importance of research-based evidence if not to fall in love with it. I entered the classroom with this image in my mind....

INSERT PICTURES "QUEEN" AND "TOWER" HERE

There I was, standing in front of students in the first class on the 'Evidence-based Midwifery' module.....everyone was looking reticent and a little anxious. Here I go..... during the morning I separated the class into smaller groups of 4-5 and gave them tasks. This chiefly consisted of setting them a simple research question and asking

them to work out how they might set about answering it. I asked Rachel's group to think about the following research question: "*Are the needs of maternity care support workers with children being met?*" I asked the group to think about what research approach they would use, what data collection method they would use and who their participants might be. The group generally did well but Rachel looked like the proverbial rabbit-in-the-headlights. When I asked her who she thought her participants might be (a simple question, I thought) she said "I don't know, I just don't know".

INSERT PICTURE "WABBIT" HERE

Rachel:

I remember feeling extremely overwhelmed and clueless as to what Susanne was asking me in that first lecture. I felt that everyone else around me understood what Susanne was asking, yet I couldn't even venture a guess. Shortly after our lecture was finished, I was undoubtedly the first student out of the classroom! I returned home feeling deflated and upset and spent some time worrying whether I was ever going to pass this module. In my misery I remembered something my personal tutor, Sarah, told me at the start of the course - she told me that if I spent the same amount of time reading around a topic as I did worrying about it, then I would have fought and won half the battle.

Susanne and Sarah then both went off to Australia to the Normal Birth Conference and we had other lecturers teaching us. I had talked with my mentors about research such as the Birthplace study (NPEU, 2012), I attended all the lectures and my understanding of research was growing but very slowly. However, Susanne's questions and Sarah's advice were ringing in my head; there was no other way to go, I knew I had to READ..... and that's exactly what I did. The subject for our assignment was breastfeeding so I set about revisiting the Baby Friendly Initiative (UNICEF, 2016), reading my chosen research papers on the topic of barriers in breastfeeding and I also hunted down some user-friendly research books. Up to now I had never read a whole 'text-book' but using my self-directed learning time I sat down with determination and read *The Research Process in Nursing* edited by Kate Gerrish and Judith Lathlean and *Introduction to Research for Midwives* by Colin Rees. These books opened my eyes and my mind and formed the foundation of my research understanding; they convinced me of the importance of research within midwifery practice. I started to *understand* what research was all about and I read widely around barriers in breastfeed and I was able to stop being scared. I began to construct a draft outline of my assignment!

Susanne:

I went off to Australia to the Normal Birth Conference in October and Rachel and her peers continued to have a series of lectures on critically evaluating research papers. On my return from Australia I met Rachel three weeks before her assignment was due in and I could not believe what I was seeing and hearing! Rachel was no longer the 'rabbit-in-the-headlights'! Instead she was confidently explaining her selected five papers and was debating with me

about the papers' findings and critiquing the research methods used. I was extremely encouraged and wrote these notes in her file (also sent to Rachel for her records)

We met at 12.00 on 8.11.16

- 1) We met for approximately 30 minutes.*
- 2) We discussed your work in progress, which is coming along very nicely - You seem to be doing very well in terms of meeting the assignment brief.*
- 3) We discussed your section on ethics in more detail and I recommended that you include a section on beneficence and non-maleficence in relation to the potentially vulnerable participants.*
- 4) You also need to explain confidentiality and anonymity more.*
- 5) We discussed the sampling methods in your papers on quantitative studies.*
- 6) Overall I advised you to be sure that you explain that you understand the terms that you are using throughout your essay.*

I look forward to seeing you again at some point.

Regards,

Susanne

Rachel:

Following my supervision meeting with Susanne, I was really pleased that she noted how much I had improved – clearly the hard work of reading was paying off! Taking her comments on board I continued writing my assignment, which bizarrely I was now starting to enjoy. After a few rough drafts and what seemed like endless reading, I was finally ready to submit my assignment – phew!

For my assignment I critiqued and reviewed five papers on barriers to breastfeeding (see reference list) and I learned much from the findings about why women don't start or might give up breastfeeding:

PRACTICE POINTS

- Some of the breastfeeding 'support' that is given by health care professionals actually inhibits breastfeeding initiation rates.
- Lack of commitment and support can encourage women to wean babies sooner than recommended thus reducing breastfeeding rates.
- Midwives must work tirelessly to identify barriers to breastfeeding and to seek to overcome them.
- Taking extended paid maternity leave and introducing paid lactation breaks could encourage more women to continue breastfeeding.

This knowledge was very useful for me and will inform my practice going forward. However I think it is even more important that I was also able to think more about HOW the researchers had undertaken their studies. This knowledge will always help me to think about the accuracy of any research. I was especially able to consider the ethical challenges of researching with people and in particular with new mothers, I found that I becoming was critical of potentially inappropriate data collection methods and I really surprised myself by getting excited about reading MORE research papers than were required for the assignment!

The morning our results were due I sat eagerly waiting for my results (like every other student midwife does). Once they came through I was gobsmacked to see I had achieved 93%. I first doubted that they were indeed my results, as I didn't think in a million years I was capable of achieving such an amazing mark. Whilst reading through my comments, I came to terms with the idea that it was indeed my mark and I was absolutely over the moon!

INSERT PICTURE "EXCITED" HERE

Prior to starting this module, I truly believed that my practice was evidence-based (a term I think is flung around but not quite understood); however only after completion of this module do I feel really confident to say YES!!! My practice is evidence-based and I have the confidence to understand the strengths and limitations of research to determine its usefulness in relation to practice and I now feel that I will be able to defend clinical decisions should they ever be scrutinised.

In a recent meeting with Susanne I even found myself saying "*I have just read a paper in the New Scientist (Wilson, 2016) and I can't believe the poor way that they are representing research about breastfeeding!*" What a change – I am no longer a rabbit in the headlights – I am now able to confidently read research papers so that I can use them in my practice (or not). As I write this, I really do believe that other student midwives are also overwhelmed and fear how to interpret research evidence but they may not always feel they can admit it. I just hope that someone somewhere reading this feels empowered to know that **WITH DETERMINATION AND FOCUSED READING** one day it might just click and you will get there!

References

The 5 papers for the essay:

Daly A, Pollard CM, Phillips M & Binns CM (2014). 'Benefits, barriers and enablers of breastfeeding: Factor analysis of population perceptions in western Australia'. *PLOS ONE*, 9(2): 1-9.

Desmond D & Meaney S (2016). 'A qualitative study investigating the barriers to returning to work for breastfeeding mothers in Ireland'. *International Breastfeeding Journal*, 11: 16-26.

Li R, Fein SB, Chen J & Grummer-Strawn LM (2008). 'Why mothers stop breastfeeding: Mothers self-reported reasons for stopping during the first year'. *Pediatrics*, 122: 69-76.

Moore E R & Coty MB (2006). 'Prenatal and postpartum focus groups with primiparas: Breastfeeding attitudes, support, barriers, self-efficacy, and intention'. *Journal of Pediatric Health Care*, 20: 35-46.

Tennant R, Wallace LM, & Law S (2006). 'Barriers to breastfeeding: A qualitative study of the views of health professionals and lay counsellors'. *Community Practitioner*, 79:152-156.

Further references:

Armstrong N (2009). 'Are student midwives influenced by the 'traditional' (non-evidence-based) practices of their clinical mentors?' *Evidence Based Midwifery*, 7(1), 24 -34.

Gerrish K & Lathlean J (Eds) (2015). *The research process in nursing* (7th ed.) Oxford: Wiley- Blackwell.

National Perinatal Epidemiology Unit (NPEU) (2012). *The birthplace cohort study*.
<https://www.npeu.ox.ac.uk/birthplace/results>

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Rees C (2011). *An introduction to research for midwives* (3rd ed.). Edinburgh: Churchill Livingstone.

Sackett D, Straus S, Richardson W, Rosenberg W, Haynes R (2000) *Evidence-Based Medicine: How to Practice and Teach EBM*. London: Churchill Livingstone.

UNICEF (2016). 'Ten steps to breastfeeding'. <http://www.tensteps.org/>

Wickham S (1999). 'Evidence-informed midwifery'. *Midwifery Today*, 51: 42–43.

Wilson C (2016). 'Strict breastfeeding rules don't work and can hurt young babies'. *New Scientist*.
<https://www.newscientist.com/article/2111610-strict-breastfeeding-rules-dont-work-and-can-hurt-young-babies/>

Wilson, J. (2008). Bridging the theory-practice gap. *Australian Nursing Journal*, 16(4), 25-25