Midwifery Education in Practice

Intimate partner violence as a subject of study during the training of nurses and midwives in Catalonia (Spain): A qualitative study

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A B S T R A C T

While nurses and midwives are in a unique position to identify and help victims of IPV, since they are often their first point of contact in the healthcare system, they need appropriate training. This study sought to examine the presence of IPV-related contents and the depth to which they are addressed in the bachelor’s degree in Nursing and in the Midwifery specialisation programme. The study also explored lecturers’ motivations for including IPV in their subjects. The methodology employed was qualitative. In-depth interviews were conducted with 16 university lecturers who teach IPV contents in the Nursing degree and Midwifery specialisation programme. The study took place in Catalonia (Spain). The research shows that lecturers feel personally committed in the training for prevention and detection of IPV. The main teaching methodology is active, experiential and requires student activity. In all cases, the lecturers call for more time and spaces to be made available to carry out this training. It would be desirable for more time to be dedicated to nurses and midwives’ university training in IPV. The topic should be approached with a more cross-disciplinary, systematised focus from all perspectives: health, psychological, social, ethical and legal. It is important that the training of teaching staff in IPV should be fostered and methodised.

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1. Introduction

Intimate partner violence (IPV) refers to behaviour by an intimate partner or ex-partner that causes physical, sexual or psychological harm, including physical aggression, sexual coercion, psychological abuse and controlling behaviours (World Health Organization- WHO, 2016). IPV is the result of power relations in which one person exerts control over the other person (Ministry of Health, Social Services and Equality, 2012).

Worldwide, 30% of women who have been in a relationship have experienced some form of IPV (WHO, 2016). In Spain, a survey conducted in 2015 of 10,171 women over 16 years of age found that 12.5% had suffered IPV at some point in their life (Government Office for IPV, 2015a).

The World Health Organization (WHO) stresses that IPV is a significant cause of death and injury worldwide and defines it as a health problem (WHO, 2013).

IPV affects women’s physical and mental health through direct pathways, such as injury, and indirect pathways, such as chronic health problems that arise from prolonged stress (Ministry of Health, Social Services and Equality, 2012; WHO, 2012). IPV is of particular concern during pregnancy when not one, but two lives are at risk. Physical assault to the abdomen may increase the risk of spontaneous abortion, preterm delivery or neonatal death. Adverse
birth outcomes may also be indirectly engendered through negative maternal behaviours, inadequate nutrition or prenatal care, and increased stress levels (Donovan et al., 2016; James et al., 2013; WHO, 2011).

It is estimated that 38%–40% of all women who attend community health and accident and emergency (A&E) services are suffering or have suffered IPV. The reason for their visit is not always an injury directly related to the aggression, but tends to be a hidden manifestation of it (Sprague et al., 2014). However, only a minority of cases are identified in healthcare services (Coll-Vinent et al., 2008). One of the reasons that explains this low rate of detection is the lack of training in this area of the professionals who provide care to these women (Sundborg et al., 2012).

Nurses and midwives are in a unique position to identify and help victims of IPV, since they are often their first point of contact in the healthcare system (Beccaria et al., 2013; Eustace et al., 2016). In Spain, midwives are primarily responsible for the monitoring and control of normal pregnancies. Along with nurses, they constitute the primary contact point for many young women within the health care system. It is thus of paramount importance that nurses and midwives receive training throughout their degree studies which includes attitudinal changes and education about principles. (Crombie et al., 2016; Hewitt, 2015).

Numerous laws and regulations derived from international references require the compulsory inclusion of training in detecting and addressing IPV in the curricula for healthcare professionals (Council of Europe, 2011; United Nations, 2011). Spain has specific legislation for the fight against IPV: “Organic Law 1/2004, of protective measures against gender based violence” (Official State Gazette—BOE, 2004) stipulates that all university healthcare disciplines must include contents for training in prevention, detection and support to victims of IPV. It also states that all universities must foster cross-discipline gender equality and non-discrimination.

Prior to 2007, the nursing qualification in Spain corresponded to a three-year university diploma. Following adherence to the Bologna Process and application of the European Higher Education Area, duration of the course was extended to four years and it became a standard university degree. Listed among the competencies of nursing graduates are: “Understand and identify the psychological and physical problems resulting from intimate partner violence (IPV). Be trained in the prevention, early detection, care, and rehabilitation of victims of this violence” (Ministry of Education and Innovation, 2008).

The European directive relating to the recognition of professional qualifications at the European level allows for two methods of study for becoming a midwife, either as an independent degree or as a specialisation with the nursing degree. In Spain, midwifery is a nursing specialisation: after obtaining their degree in nursing, aspiring midwives take a national exam to access a two-year residency training programme, from which they earn the title of Obstetric-Gynaecological Nurse (Midwife). The programme specialisation in obstetrics and gynaecology is based on the acquisition of knowledge through practical experience and theoretical learning: midwives are equipped with the skills to provide care on the sexual and reproductive health of women in the different phases of their lives, from adolescence to menopause, with particular emphasis on the processes of pregnancy, childbirth and puerperium. Among the competencies they must acquire are: “Identify and advise women about current legislation on the subject of sexual and reproductive health; (…) offences against sexual freedom, IPV (…)” (Ministry of Health and Social Policy, 2005).

Spain is organised politically and geographically into 17 Autonomous Communities (ACs). Catalonia is one of these ACs and has 14 Schools or Faculties of Nursing. The theoretical training of all nurses engaged in the Midwifery specialisation in the Catalonia AC was presented at the university until 2012, and is currently provided by the Catalan Institute of Health Studies (IES). The IES is a public institution attached to the Catalan Ministry of Health and is responsible for pedagogical promotion and renewal in the field of health sciences.

The aim of this article is to use the reflections and explanations given by lecturers to analyse the presence of IPV-related subjects and the depth to which they are addressed in the bachelor’s degree in Nursing and the Midwifery specialisation programme in Catalonia (Spain). The study also explores lecturers’ motivations for including IPV in their subjects.

2. Method

2.1. Design

A descriptive qualitative research methodology with a phenomenological approach was used (Giorgi and Giorgi, 2003). The objective of this study was to gather information on, systematize, and disseminate the types of training on IPV that are undertaken during the education of nurses and midwives in Catalan universities. Further to this was the objective of identifying the concerns and proposals that the teaching staff had in terms of improving the training in this topic.

2.2. Scope

The study was conducted from September 2015 to September 2016 in the public and private universities of Catalonia that offer a bachelor’s degree in Nursing, and at the Catalan Institute of Health Studies (IES), which provides theoretical training in Midwifery. Previously it also took place in the University of Barcelona, where midwifery training was offered between 1994 and 2013 (the IES has provided theoretical training of midwives since 2013).

2.3. Data collection

First, a systematic review was conducted of the institutions’ websites to determine IPV contents through document analysis and topic and concept descriptors in the curricula of the Nursing degree and the specialised training course for Midwives in Catalonia. The subject or subjects were identified in which IPV and its characteristics are presented.

Secondly, an email was sent to the directors and/or heads of studies in the case of the Nursing degree, and to the head of the specialised training course for Midwives. The email explained the study, solicited confirmation of the link between subjects and IPV training and asked whether other subjects also addressed the issue. Recipients were requested to furnish the contact details of teaching staff responsible for IPV training in each subject. These lecturers were then sent an email informing them about the study and asking if they would be prepared to take part in an in-person interview.

Table 1 shows the 14 universities with Nursing Schools or Faculties in Catalonia, classified into public or private and showing whether confirmation was given by the director/head of studies or not. The table also indicates the subjects in which IPV-related content is offered in the Nursing bachelor’s degree and the specialised training course for Midwives, the academic year in which it is present, the number of European Credit Transfer and Accumulation System (ECTS) credits awarded, whether the subject is compulsory or optional, and if an interview was conducted with the lecturer responsible for the IPV training. Of the 14 Nursing Schools or Faculties, 13 included IPV contents in their curricula, and of the 14
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