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*Undertaking midwifery studies: Commencing students' views*

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## **Undertaking midwifery studies: commencing students' views**

### **Objective**

This study was undertaken to explore the motivations and beliefs of commencing midwifery students against a background of high course demand and high student attrition.

### **Design**

A qualitative analysis of student reflective essays.

### **Setting**

Melbourne, Australia

### **Participants**

All commencing midwifery students, in 2008, were invited to participate (n=41).

### **Measurements and findings**

Three primary motivations for choosing midwifery were identified, including: notions of altruism (wanting to help), a fascination with pregnancy and birth and a view of midwifery as a personally satisfying career.

### **Key conclusions and implications for practice**

Bachelor of Midwifery programs attract students with idealised views about midwifery practice. Such views may lead to student disillusionment, tensions with educators and clinicians and higher rates of student attrition. Students need greater support to examine their views about midwifery practice. More meaningful support may assist the student's successful socialisation into clinical practice.

### **Introduction**

In the past decade there has been a significant shift to Bachelor of Midwifery (Bmid) education in Australia (Carolan et al., 2007, Seibold, 2005) and this mode of preparation is expected to produce increasing numbers of midwives in the future (Leap et al., 2003). Moreover, a move away from nurse educated midwifery programs, together with the promotion of midwifery as a separate profession, (Carolan and Hodnett, 2007, Leap and Barclay, 2001) means that students undertaking midwifery programs have become more diverse. This diversity is seen in the greater percentages of mature age students enrolled in midwifery programs, many of whom have previously completed studies in other disciplines or have been part of the workforce for many years (McKenna and Rolls, 2007, Seibold, 2005). School leavers constitute the other major group of midwifery students and therefore student age range can span as much as 30 years (Seibold, 2005). Midwifery students today also come with differing expectations and beliefs about maternity care (Abushaikha, 2006, Ulrich, 2009, Williams, 2006), which may be motivated by factors such as life experiences and personal philosophies (Seibold, 2005), consumer awareness (Carolan, 2009) and students' own birth experiences (Ulrich 2009). For most,

enrolment in the Bachelor of Midwifery program is the student's first exposure to university and hospital systems, in contrast to earlier midwifery students who were already socialised as nurses (Green and Baird, 2009). This situation gives rise to new concerns, including difficulties with transition and insufficient student support (Green and Baird, 2009, Begley, 2001) and course attrition rates as high as 30% (Leap et al., 2003). Green and Baird (2009), for example, found that when compared with midwifery students from nursing backgrounds, undergraduate midwifery students frequently described feeling overwhelmed and unsupported. A mismatch between student expectations and the realities of clinical practice may also contribute to attrition rates (Ball et al., 2002).

Whatever the reasons for attrition, it is of global importance that rates are addressed. In Australia, for example, an ageing midwifery workforce predicts a significant shortfall of midwives over the next decade (AHMAC, 2002, Leap et al., 2003) and current numbers of graduating midwives are already unlikely to be sufficient to meet future service needs (Leap et al., 2003). It is thus of critical importance that existing midwifery students are supported to complete whenever possible. The provision of meaningful student support is likely to effect a difference in course completion rates and therefore it is important for midwifery educators to understand more about the beliefs and motivations of this group. An understanding of the factors that motivate students to choose midwifery, and how those factors articulate with successful course completion, is considered a first step towards providing more meaningful student support. Currently, there is a recognised dearth of literature in this area (McCall et al., 2009, Williams, 2006). This study, therefore, explored the career motivations and midwifery beliefs of a commencing group of midwifery students at one Australian University.

### **Literature review**

The literature, examining why students choose midwifery as a career, falls broadly into two categories. In the first, student motivations appear to be altruistic and context specific. For example, Ulrich (2009), from the United States of America [US], reported that nurses choosing midwifery as a career pathway were motivated by their personal birth experiences and a love of maternity nursing. Many discussed midwifery as a 'calling' and described a moment of 'epiphany' when they realised their 'calling' (p.127). This understanding seems contingent on the development of midwifery in the US, from its roots in the care of the poor and disadvantaged and a current emphasis on birth centres and home births (Dawley, 2003). In the United Kingdom [UK], Williams (2006) discusses altruistic notions of 'wanting to make a difference' and offers a clear delineation between midwifery and nursing practice, which is likely contingent with strong support for midwifery practice and 'women centred' care (NMC: Nursing and Midwifery Council, 2004). Similar to Ulrich (2009) participants in Williams' study also described a 'sense of inevitability' in choosing midwifery, as something participants had always wanted to do. This altruistic thread is also present in nursing literature and presents as a strong desire to help others and a wish to make a difference (Boughn and Lentini, 1999, Rognstad et al., 2004). In the second category, midwifery students were motivated by aspirations of personal development, including opportunities for further education and a

view of midwifery as a personally satisfying occupation (Abushaikha, 2006, Rognstad et al., 2004). Abushaikha (2006) for example, found that students in Jordan considered midwifery to be an avenue for advancement, particularly in terms of further education and personal development, while Rognstad et al. (2004), found that nursing students in Norway were motivated to take up midwifery studies as a means of self development in the pursuit of personally fulfilling work (p.494). Rognstad discusses this finding in the light of increasing individualisation and the pursuit of personally fulfilling work among young people generally (2004, p.494).

### **Methodology**

First year midwifery students were asked to fill out basic demographic questionnaires, containing information such as age, income, living arrangements and children. Students were then asked to write a reflective essay on '**Why I want to be a midwife: Role of the midwife in Australia**'. Ethics approval and student permission was obtained prior to using student reflections for research purposes. Student confidentiality was maintained by using an identifier code rather than student name on reflective essays.

### **Sample and Recruitment**

All first year midwifery students enrolled in 2008 (n=41) were invited to participate. By week five of semester 1, when the study was undertaken, a total of 37 students remained enrolled in the course. Of these, 32 students agreed to participate.

### **Data Analysis**

Demographic data were analysed using SPSS, version 15. Qualitative data were analysed using thematic content analysis informed by Burnard's (1991) method. The following steps were employed:

- Essays were read and re-read several times to allow the researcher to be fully acquainted with the content.
- Core consistencies, themes and values were sought
- Data was classified under broad headings,
- Reliability of analysis was addressed by asking a colleague to independently generate a theme list
- Headings were amended and collapsed as data analysis progressed
- Themes/ sub-themes were moved to the category where they belonged
- Emergent understandings were tested against the data
- Alternate explanations were sought

### **Results**

Demographics revealed that students were predominantly aged less than 25 years (71%) and were employed up to 16 hours a week (71%). Most had an annual income of less than \$30,000 (80.6%) and lived with a partner, family or friends (96.8%). All were female and 32.3% had at least one child. All but four were Australian born.

**Insert table 1 here**

### **Themes**

Data analysis identified three categories of factors influencing students to choose midwifery: a sense of altruism (wanting to help), a fascination with pregnancy and birth and a view of midwifery as a personally satisfying career. A general concern for childbearing women pervaded student accounts, as did an understanding of the pregnant woman as particularly vulnerable.

### ***A sense of altruism***

The majority of students felt a strong urge to care for women and the phrase 'wanting to help' appeared almost ubiquitously in student accounts. For most, this desire was described as inherent or as 'something that was always there'.

- *I love to help people and I chose to be a midwife because I feel it is something I have had inside on me ever since I was little (S24)*

There was also a sense of women helping women and many students spoke of a being motivated by concerns for women in general, but for women of culturally diverse backgrounds particularly.

- *I wanted to be a midwife ... as I was appalled by the state of midwifery care in underdeveloped countries... the lack of resources I believe that every woman is entitled to expect (S9)*
- *I think midwife's role in Australia is to be very aware of cultural diversities. We are a very multi cultural country (S4)*
- *I would like to help the women in my community because I think that they sometimes have difficulties with other nurses and midwives... mainly due to the language barrier and cultural clash (S11)*

Some students felt they possessed personality traits that rendered them particularly suited to becoming a midwife. Such qualities were identified by both the individual student and a wider group of friends and family.

- *A major part of my personality is my nurturing side. I... find a lot of joy in helping and comforting others. Hence I have the label of 'nursy' or 'mum' in my group of friends (S31).*
- *I think my role in my family also helped shape my nurturing personality. I am the eldest of 4 and am often referred to as the 'mother hen' in both my social circles and my family (S29)*

A general concern for pregnant women underpinned students' desire to help and this desire manifested as a quest to provide information for women and also to act as a facilitator for the pregnant woman's wishes and hopes.

- *A midwife will support and inform a woman of her rights and decisions (S2)*
- *I want to help women make her [sic] own decisions and respect them (S16)*

There was a general feeling that the pregnant woman might encounter some difficulty in making decisions around childbearing and in maintaining control of her care. In response to this perceived threat, students discussed advocating for pregnant women and empowering women to make choices.

- *I'm interested to work in partnership with women, providing them with information and support for them to have control and satisfaction of their birthing and maternity care. I have a genuine interest to support and empower women. I feel I can advocate well on other's behalves (S6)*
- *A midwife's role is to empower, support and guide a woman through the amazing experience of childbirth and to ensure that this experience is as positive as possible! (S28)*

Students also expressed concerns about safeguarding the experience of birth for women, particularly normal birth. This included a view of birth as a special experience that was in danger of disruption by medical intervention.

- *I think a major part of the role of a midwife in Australia is to help stop birth from becoming over medicalised, educating women about options ...that can make the experience a positive one (S23)*
- *I'm really looking forward to being able to help make the experience of pregnancy and birth a very special, happy and calm time the way it should be (S26)*

The emergence of the student's desire to help women during pregnancy and birth could sometimes be traced to the student's own birth experience, and this desire was influenced both by favourable and unfavourable experiences. Students with difficult birth experiences were motivated to help women and ensure that they didn't suffer a similar experience.

- *I'm passionate about making the birthing process for families a comfortable and positive experience (The midwife I had was a B\*\*\*\*h) (S22)*

Although the experience may have been negative, some students felt that they had grown from the experience and their new understanding equipped them well to assist others, as below:

- *I chose this course as I encountered ... many struggles regarding having children. I hope that I will be able to help other mothers/parents the way that I was helped during these trying times (S27)*

Students with favourable or empowering birth experiences were keen to propagate such experiences for other women.

- *I am very interested in embracing the 'natural' side of childbirth...a good friend of mine...at the age of 41 gave birth at home with a*

*midwife. She had a wonderful experience and said she couldn't have done it without her midwife (S31)*

- *I have chosen to become a midwife as I have had 3 children... It brought out the sensitive side of me ...and I really became aware of other women and their stories. I feel like I can help others (S5)*
- *I had three 'active births' in birthing centres with empowering midwives and I'm all for midwife-led and women centered maternity services for women able to achieve a normal vaginal delivery (S6)*

### ***Fascination with pregnancy and birth***

The second theme to influence student entry into the undergraduate midwifery program was an abiding interest in pregnancy and a fascination with pregnancy and birth.

- *I love the experience women and their families go through during pregnancy, labour and birth (S4)*
- *I find pregnancy and labour very interesting and am enthused to learn everything about it (S14)*

This interest had often been present for many years prior to commencing studies and manifested in the student accessing whatever information she could about pregnancy, including reading pregnancy related books and watching TV programs:

- *I watch all the maternity shows on foxtel every day like "bringing home baby" and "pregnancy for dummies", I just love it all, I'm so fascinated by the entire process! (S13)*
- *I am always watching maternity shows to further my knowledge before I even started the course (S24)*
- *I have been reading lots of pregnancy books for many years, in fact I read 'What to expect when you're expecting' when I was only 17 (S29)*

In addition to a long standing interest in pregnancy, many students described a love of babies and an interest in working with newborn infants.

- *I enjoy being around babies which was also what attracted me to midwifery (S15)*
- *I have always had a love of babies (S28)*
- *I chose the bachelor of midwifery because I have always wanted to work with newborns (S30)*

Many students were motivated by a wish to be part of the birth process, which was frequently viewed as a moving and magical event. This idea of birth as a special time appeared in 24 of the 32 transcripts

- *it is such a special time in a women's life, I would feel honoured to be part of it (S24)*

- *I want to be a part of the joy of birth and share this experience with the women (S1)*
- *I wanted to be involved in one of the most amazing experience of life (a child being born into this world) (S26)*

***Midwifery as a personally satisfying career.***

The third theme to emerge was a view of midwifery as a personally satisfying career option and, within this theme, two main categories were identified. These were: a clear understanding that it was Midwifery not Nursing, and secondly, midwifery as a meaningful occupation. Students were often very clear that they had no interest in nursing:

- *I chose the direct entry midwifery because I only wanted to direct my energy into women and their babies ... I don't like the idea of working with all people, eg elderly and men (S2)*
- *I chose the 'Bachelor of Midwifery' course as my first preference because I'm interested solely in midwifery, not nursing (S6)*

Some mature aged students described suddenly realising that midwifery might constitute a more meaningful career choice for them. Dissatisfaction with current employment seemed to provide the catalyst for this career reappraisal, as did the passage of time or arrival at a significant birthday. S8 and S31 provide typical accounts:

- *I chose to become a midwife after working in advertising and marketing over the past 5 years and was not feeling rewarded with my career. I realized I wanted to do something more worthwhile which is why I have chosen midwifery (S8)*
- *I pursued a career in graphic design for close to 5 years. During that time I didn't feel 100% job satisfaction, and as my 30<sup>th</sup> birthday approached I felt more anxious about being stuck in a career for the rest of my working life (S31)*

For the majority of the students, the quest for personally satisfying work was a key motivating factor in choosing midwifery. Midwifery was seen as a personally rewarding role which would likely provide greater job satisfaction:

- *I believe it would give me a great deal of satisfaction working in an environment where as a midwife my role is very important in the care of the woman (S8)*
- *The midwife is the carer and supporter and I feel this is what I would get the most satisfaction out of (S31)*

There was a general understanding of midwifery as a socially admirable role:

- *I choose the bachelor of midwifery course because I thought that being a midwife would be a very fitting and rewarding job (S11)*
- *It's a very honourable job (S22)*

- *I feel that being a midwife is a very important and most rewarding job. (S26)*

For a small percentage, becoming a midwife was seen as an avenue for personal development and self improvement

- *I believe that being a midwife will make me a better person, and that it will elevate my communication skills. (S11)*

S19 a recent immigrant to Australia, felt becoming a midwife would improve her social status in Australia, as well as give her an opportunity to earn a living.

- *I want to improve myself as a midwife in Australia (S19)*

Having reached a decision that Midwifery was indeed what they would like to pursue, some students described a willingness for sacrifice in pursuit of their new found ambition:

- *I have found I am willing to give things up and I'm truly hungry for this experience (S3)*

## **Discussion**

Although findings are limited by the sample size, this study nonetheless offers some original insights into the motivations of students undertaking undergraduate midwifery studies in Australia. As such, it can be considered a source of baseline information that will serve to augment studies considering the value of undergraduate midwifery preparation (Leap et al., 2003) and the experiences of students (McKenna and Rolls, 2007, Seibold, 2005). It also extends our understanding of the beliefs espoused by commencing midwifery students and this is a critical first step in fashioning meaningful support to facilitate student completion.

Results of this study suggest that students entered the Bachelor of Midwifery course with idealised and preconceived ideas of what being a midwife entailed and, while the implications for this finding have not yet been fully addressed in the literature, there is some recognition that preconceived notions might be a source of tension within course delivery and may also impact negatively on student satisfaction (McCall et al., 2009, Seibold, 2005). Seibold, for example, found that mature age students, particularly, came to the undergraduate midwifery course with clear femocentric philosophies, which were informed by students' involvement in political activism and radical midwifery groups. Although younger students in Seibold's study did not come into the course with such strong views they rapidly assimilated the views of the mature students and this situation made for difficulties in course administration. McCall et al. (2009), similarly found that midwifery students came to the course with preconceived ideas, particularly about home births and many students espoused aspirations to become independent midwives although such ambition is difficult to realise in Australia. McCall further found that unmet student expectations tended to result in course deferral or withdrawal. In the current study, students expressed idealised views of midwifery and there is a danger that this factor could contribute to student

attrition if disillusionment sets in. Similar concerns have been documented by Seibold (2005) and Williams (2006). On the other hand, Fraser and Hughes considered student idealism to be an opportunity to create a caring environment for women but at the same time cautions that idealistic views create challenges for educators.

Overall, students in this study were motivated to undertake midwifery studies by three primary factors: an altruistic wish to help other women; a view of pregnancy and birth as a special event and a quest for meaningful work.

### **An altruistic wish to help other women**

Students spoke of 'wanting to help' as a primary motivating factor in their choice of midwifery studies. This altruistic notion is similarly found in the midwifery literature that is available for comparison (Seibold, 2005, Williams, 2006) and more broadly in nursing studies (Beck, 2000, Boughn and Lentini, 1999, Rognstad et al., 2004). Midwifery students, in this study, were also keen to act as advocates and empowering agents for childbearing women. This notion was underpinned by a belief that control within the childbearing arena was contested and that women might need assistance to retain control of their bodies. Similar concerns about empowerment and agency are reported in other studies of undergraduate midwifery students (Fraser and Hughes, 2009, Seibold, 2005, Williams, 2006). This emphasis on advocacy likely reflects struggles experienced by the midwifery profession as a whole, to establish the current philosophy of care, based on normal birth and women centred care, which has emerged as distinct from earlier more medicalised models of maternity care (Carolan and Hodnett, 2007, Leap, 2000, Page, 2000).

### **Pregnancy and birth as a special event**

For students in the current study, the experience of pregnancy and birth was seen as magical and life-changing. The majority of the students (75%) spoke of a long and abiding fascination with pregnancy and birth and, to a lesser extent, with infants. Most expressed a desire to be part of the experience of birth and considered participation emotionally rewarding and a privilege. Similar findings of birth as a miraculous event are marginally seen in the literature (Cleeton, 2001, Fraser and Hughes, 2009). Fraser and Hughes (2009), for example, considered the views of midwifery students and found that pregnancy and birth were viewed as special and a miracle and, Cleeton (2001), who examined the childbirth views of sociology students, found that participants considered birth to be a beautiful and emotional experience although most were concerned about levels of pain. This notion of 'beautiful' or 'magical' birth also appears in the broader midwifery literature, most often in association with midwifery led care or birth centre / home births, such as Kemp and Sandall (2009 in press). For students in the current study, there was little difference in the notion of birth as special among students, who were mothers compared to those who were not, and this is similar to findings reported by Fraser and Hughes (2009). Indeed, midwifery students here, who had already given birth were, if anything, more protective of the notion of birth as a very special time for women. This was particularly evident among students who considered their prior birth experience as unfavourable.

### **The quest for meaningful work**

The third factor influencing students to seek out midwifery studies was a quest for meaningful work and most spoke of a wish to be involved in work which they considered worthwhile. These students used a variety of adjectives, such as honourable, fitting, noble and important to convey the esteem they felt for the midwifery profession. Although this notion of midwifery as a noble profession does not appear often in the broader midwifery literature, it is sometimes seen in sociological or historical texts, such as Van Teijlingen et al. (2000). It is however, commonly found on the websites of midwifery organisations and it is likely that prospective students visit these sites as they search for information on midwifery studies. It also seems likely that, in the absence of other forms of midwifery information and a limited opportunity to meet midwives, this information may contribute to the students' idealised views of midwifery.

Participants here had a clear understanding of midwifery as different to nursing and most expressed a wish to work exclusively with women and babies. Similar findings present in the midwifery literature (McCall et al., 2009, Williams, 2006). This preference also makes an appearance in the nursing literature, where midwifery is often seen as a preferred area of specialization for nurses, compared to care of the sick or elderly (Rognstad et al., 2004, Williams, 2006). Rognstad et al. discuss this quest for personally fulfilling work as contingent on ideas of self actualization and personal development, and as related to increasing individualisation among young people (2004).

Students in this study embraced the notion of personally rewarding and satisfying work, and this finding presents most prominently among mature aged students who were often motivated by dissatisfaction in their current employment.

Finally, it is interesting to note that of the literature examining midwifery student motivation, personal development opportunities and opportunities for further education are frequently identified as important (Abushaikha, 2006, Rognstad et al., 2004), however, these factors were not identified by students in the current study. There was additionally no mention of financial reward or job security which may relate to idealised views of midwifery practice.

## **Conclusions**

In conclusion, undergraduate education is a relatively new form of midwifery preparation, in Australia, and this course attracts students with preconceived ideas about what midwifery entails. Preconceived and idealistic views, in turn, may lead to student disillusionment and tensions between educators, clinicians and midwifery students. Such difficulties may result in higher rates of attrition. What may be needed is greater support for students to examine and question perceived notions of midwifery practice. Such support may assist in the transition process by better equipping the student to assimilate and socialise successfully into clinical midwifery practice.

## References

- Abushaikha, L., 2006. Midwifery students' enrolment reasons and evaluations of the first Bachelor of Midwifery programme in Jordan. *Midwifery* 22 (4), 323-329.
- AHMAC, 2002. *The midwifery workforce in Australia 2002-2012*. Australian Health Workforce Advisory Committee.
- Ball, L., Curtis, P, Kirkham, M., 2002. *Why do midwives leave?* Royal College of Midwives Publications, London.
- Beck, C., 2000. The Experience of Choosing Nursing as a Career. *Journal of Nursing Education* 39 (7), 320-322.
- Begley, C., 2001. Giving Midwifery care: student midwives' views of their working role *Midwifery* 17, 24-34.
- Boughn, S., Lentini, A., 1999. Why Do Women Choose Nursing? *Journal of Nursing Education* 38 (4), 156-161.
- Burnard, M.P., 1991. A method of analysing interview transcripts in qualitative research. *Nurse Education Today* 11 (4), 461-466.
- Carolan, M.C., 2009. Towards understanding the concept of risk for pregnant women: some nursing and midwifery implications. *Journal of Clinical Nursing* 18 (5), 652-658.
- Carolan, M.C., Hodnett, E.D., 2007. 'With woman' philosophy: examining the evidence, answering the questions. *Nursing Inquiry* 14 (2), 140-152.
- Carolan, M.C., Kruger, G., Brown, V., 2007. Out of the Ashes: The new bachelor of midwifery curriculum at Victoria University Women and Birth 20 (3), 127-130.
- Cleeton, E., 2001. Attitudes and Beliefs About Childbirth Among College Students: Results of an Educational Intervention. *Birth* 28 (3), 192-201.
- Dawley, K., 2003. Nurse-Midwifery in the United States and Its 1940s Expansion: Expansion of Education and Practice 1940-1950. *Journal of Midwifery and Womens Health* 48 (2).
- Fraser, D., Hughes, A., 2009. Perceptions of motherhood: The effect of experience and knowledge on midwifery students. *Midwifery* 25 (3), 307-316.
- Green, S., Baird, K., 2009. An exploratory, comparative study investigating attrition and retention of student midwives. *Midwifery* 25 (1), 79-87.

- Kemp, J., Sandall, J., 2009. Normal birth, magical birth: the role of the 36-week birth talk in caseload midwifery practice *Midwifery*.
- Leap, N., 2000. The less we do the more we give. In: Kirkham, M. (Ed.), *The midwife-mother relationship*. MacMillan Press, London, pp. 1-18.
- Leap, N., Barclay, L., 2001. National review of nursing education, midwifery education: Literature review and additional material. Commonwealth Department of Education, Science and Training, Canberra.
- Leap, N., Barclay, L., Sheehan, A., 2003. Results of the Australian midwifery action project education survey: paper 3 workforce issues. *Australian Journal of Midwifery* 16 (3), 12-17.
- McCall, L., Wray, N., McKenna, L., 2009. Influence of clinical placement on undergraduate midwifery students' career intentions. *Midwifery* 25 (4), 403-410.
- McKenna, L., Rolls, C., 2007. Bachelor of Midwifery: Reflections on the first 5 years from two Victorian universities. *Women and Birth*, 20 (2), 81-84.
- NMC: Nursing and Midwifery Council, 2004. *Midwives rules and standards 05.04 :Protecting the public through professional standards* London.
- Page, L.A., 2000. *The new midwifery : science and sensitivity in practice*. Churchill Livingstone, Edinburgh.
- Rognstad, M.K., Aasland, O., Granum, V., 2004. How do nursing students regard their future career? Career preferences in the post-modern society. *Journal of Nursing Education* 24, 493-500
- Seibold, C., 2005. The experiences of a first cohort of Bachelor of Midwifery students, Victoria, Australia *Australian Midwifery* 18 (3), 9-16.
- Ulrich, S., 2009. Applicants to a nurse-midwifery education program disclose factors that influence their career choice. *Journal of Midwifery and Womens Health* 54 (2), 127-132.
- Van Teijlingen, E., Lewis, G., McCaffery, P., Porter, E., 2000. *Midwifery and the Medicalization of Childbirth: Comparative Perspectives*. Nova Science Publishers, Huntington, NY.
- Williams, J., 2006. Why women choose midwifery: a narrative analysis of motivations and understandings in a group of first-year student midwives. *Evidence-Based Midwifery* 4 (2), 46-52.