

## ORIGINAL RESEARCH ARTICLE

# Midwifery students' solution-focused thinking and communication skills: A cross sectional study

DOI: 10.29063/ajrh2025/v29i3.7

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### Abstract

The objective of present study is to examine midwifery students' solution-focused thinking and communication skills. Study type is cross sectional research. Present study was conducted on 183 midwifery students. Data of research were collected using a Student Information Form (SIF), Solution Focused Inventory (SFI) and Solution Focality in Communication Scale (SFCS). The study found a significant difference in solution-focused thinking and solution-focused communication skills among first- and fourth-grade students ( $p < 0.05$ ). The mean scores of solution-focused thinking and communication of fourth-grade students were more than the mean scores of first-grade students. There was a significant positive correlation between solution-focused thinking and communication levels of students ( $p < 0.05$ ). According to simple linear regression analyze, students' solution-focused thinking skills were significant predictors of their solution-focused communication and explained 13.1% of the variance. Students' solution-focused thinking and communication skills are at a moderate level and are affected by grade level. As students' solution-focused thinking skills increase, their solution-focused in communication level also increases. (*Afr J Reprod Health* 2025; 29 [3]: 50-57).

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**Keywords:** Communication; midwifery; students; solution-focused brief therapy; thinking skill

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### Résumé

L'objectif de la présente étude est d'examiner les capacités de réflexion et de communication des étudiantes sages-femmes. Le type d'étude est une recherche transversale. La présente étude a été menée auprès de 183 étudiantes sages-femmes. Les données de recherche ont été collectées à l'aide d'un formulaire d'information sur l'étudiant (SIF), d'un inventaire axé sur les solutions (SFI) et d'une échelle de focalisation de solution dans la communication (SFCS). L'étude a révélé une différence significative dans la réflexion axée sur les solutions et les compétences de communication axées sur les solutions parmi les élèves de première et de quatrième année ( $p < 0,05$ ). Les scores moyens de réflexion et de communication axées sur les solutions des élèves de quatrième année étaient supérieurs aux scores moyens des élèves de première année. Il existe une corrélation positive significative entre la réflexion axée sur les solutions et les niveaux de communication des étudiants ( $p < 0,05$ ). Selon une simple analyse de régression linéaire, les capacités de réflexion axées sur les solutions des étudiants étaient des prédicteurs significatifs de leur communication axée sur les solutions et expliquaient 13,1 % de la variance. Les capacités de réflexion et de communication des élèves axées sur les solutions sont d'un niveau modéré et dépendent du niveau scolaire. À mesure que les capacités de réflexion axées sur les solutions des élèves augmentent, leur niveau de communication axé sur les solutions augmente également. (*Afr J Reprod Health* 2025; 29 [3]: 50-57).

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**Mots-clés:** Communication; sage-femme; étudiants; thérapie brève axée sur les solutions; capacité de réflexion

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### Introduction

The high-level skills and learning tendencies required for success in the information era are referred to as twenty-first-century skills. Problem-solving, critical thinking, communication, collaboration, and creativity abilities are essential for 21st-century learning and innovation.<sup>1</sup> The goal of midwifery education is to provide students with the professional knowledge and skills they will

need in their future careers, as well as to prepare midwives who are self-assured, competent, and have high 21st-century skills such as critical thinking, problem-solving, and communication talents.<sup>2</sup> Effective communication and problem-solving abilities are critical for midwifery students' academic and professional development.<sup>3</sup>

The solution-focused approach was developed in the early 1980s under the leadership of Steve de Shazer and Insoo Kim Berg. This

approach suggests implementing solutions that are focused on the future rather than the past to solve the issue. Solution-focused thinking is a cognitive approach that focuses on problems' solutions rather than the problems themselves. Namely, instead than focusing on the problem, solution-focused thinking is a way of thinking that attempts to identify potential resources and design effective action plans to attain future goals.<sup>4</sup> It is known that individuals' anxiety,<sup>5</sup> stress, and depression<sup>6</sup> levels decrease as their solution-focused thinking skills improve, while their hope,<sup>7</sup> psychological well-being<sup>8</sup>, self-efficacy,<sup>9</sup> problem-solving,<sup>10</sup> resilience, and life satisfaction<sup>6</sup>, levels rise. In recently years, there has been increasing attention in the use of solution-focused thinking skills in healthcare services. Solution-focused nursing care practices encourage holistic care by drawing attention to patients' psychosocial needs.<sup>11</sup> Furthermore, because it is effective in a short time, it is applicable in health-care services like midwifery and nursing.<sup>12</sup>

Effective communication is at the heart of high-quality midwifery care. High-quality midwifery care is possible by training midwives with high critical thinking, problem-solving, and communication skills. Midwives' effective interpersonal communication skills help them find applicable solutions that enable them to cope with their problems.<sup>13</sup> International organizations, like the World Health Organization (WHO) and the International Confederation of Midwives (ICM), emphasize the need to develop problem-solving, communication, and cooperation skills in midwives through a lifelong learning approach in midwifery education.<sup>14,15</sup> It is known in the literature that midwifery students have moderate communication skills.<sup>16</sup> According to the present findings, further training and courses in the midwifery curriculum are required to improve students' communication skills. The core of the solution-focused approach lies in effective communication. Solution-focused language is a collaborative form of communication between the client and the counselor. It involves using positive phrases instead of negative terms and focusing on finding solutions instead than emphasizing on problems.<sup>17</sup> In midwives' communication with the individuals, they care for, being solution-focused and asking solution-focused

questions, rather than problem-focused inquiries, is more helpful in helping their adaptability to their current state.<sup>18</sup> In this manner, solution-focused communication in midwifery practices permits for more efficient use of time.

Quality, effective, and efficient midwifery services provided by midwives with high critical thinking, problem-solving, and communication skills are important to meeting the Sustainable Development Goals (SDG) for maternity and child health.<sup>19</sup> Determining the solution-focused thinking and communication skills of students who will be future health professionals can contribute to social development, maternal and child health, and the midwifery profession. A thorough examination of the literature revealed no research on midwifery students' communication and solution-focused thinking. As a result, understanding the relationship between solution-focused thinking and communication may result in the future inclusion of solution-focused midwifery practices in midwifery education curricula.

### ***Questions of the study***

In the study, answers to the following questions were sought:

1. What are the solution-focused thinking skills and solution-focused communication levels of first- and fourth-grade midwifery students?
2. Do solution-focused thinking and solution-focused communication skills of midwifery students change in relation to grade degree characteristics?

### ***Objectives***

This study purposed to examine solution-focused thinking and solution-focused communication skills of first- and fourth-grade midwifery students and to define the factors affecting these variables in addition to the relationship among them.

## **Methods**

### ***Study design and participants***

The type of study is cross sectional research. Present study was performed in the midwifery department of the faculty of health sciences at a state university in Turkey between February and

March 2022. The universe of the study consisted of 194 students (n=106 first grade students; n=88 fourth grade students). In the research, no sample selection was made, and it was reached to 94% of universe. The study was completed 183 students (n=99 first grade students; n=84 fourth grade students). The inclusion criteria for present study were as follows: (a) being a midwifery student, (b) volunteered to participate. The exclusion criteria for this study was being unwilling to participate.

Data were gathered using a Student Information Form, Solution Focused Inventory (SFI) and Solution Focality in Communication Scale (SFCS).

**Student Information Form (SIF);** This form was prepared by the researcher based on the relevant literature<sup>5-10</sup>. In the form, there are seven questions to determine some demographic characteristics such as students' age, education, family type, income information, etc.

**Solution Focused Inventory (SFI);** Present scale was developed by Grant *et al.* (2012),<sup>20</sup> to measure whether the individual shows a tendency towards solution-focused thinking (SFT). In Türkiye, its validity and reliability were confirmed by Sanal-Karahan & Hamarta.<sup>21</sup> This is a 6-point Likert-type (1= strongly disagree, 2= disagree 3= somewhat disagree 4= somewhat agree 5= agree 6 = strongly agree) scale with 12 items. It has three subscales: problem disengagement (items 1, 2, 4 and 5), goal orientation (items 9, 10, 11 and 12) and resource activation (items 3, 6, 7 and 8). 1, 2, 4, and 5 items are scored in reverse. The total score that can be obtained from the scale varies between 12 and 72, and the score that can be obtained from the subscales varies between 4 and 24. High scores indicate high SFT. The Cronbach  $\alpha$  internal consistency reliability of the scale was 0.77 for the problem disengagement subscale, 0.84 for the goal orientation subscale, and 0.70 for the resource activation subscale.<sup>21</sup> In present study, Cronbach  $\alpha$  internal consistency reliability of the scale was 0.68 for the problem disengagement subscale, 0.83 for the goal orientation subscale, and 0.66 for the resource activation subscale.

**Solution Focality in Communication Scale (SFCS);** This scale was developed by Sahin and Derin (2020),<sup>17</sup> to determine the individual's level of

solution orientation in communication. The scale consists of 17 items and three subscales: solution-focused intervention in communication (items 2, 4, 5, 7, 10, 12, 14 and 16), evaluation of solution opportunities in communication (items 3, 6, 8, 11 and 13) and solution-focused approach in communication (items 1, 9, 15, 17). The scale is a Likert type scale and the rating from 1 to 5 (1=Never, 2= Rarely, 3= Sometimes, 4= Often, 5= Always) is used in its calculation. The 10th item on the scale is scored reverse. The total score that can be obtained from the scale varies between 17to 85, and the score that can be obtained from the subscale varies between 8 to 40, 5 to 25, and 4 to 20, respectively. As the score obtained from the scale increases, it shows that the individual's level of solution-focused in communication is high. Cronbach's Alpha internal consistency reliability of this scale was obtained as 0.87.<sup>17</sup> In present study, internal consistency reliability, Cronbach's Alpha, was determined to be 0.79.

### **Data collection**

The forms were applied online via Google Forms to the students who gave their permission to participate in the research. They were informed that it was optional to provide names in the data collection form, except for the consent form, and that all information would remain confidential to ensure accurate data collection. The completion time for the questionnaire was approximately 15 min.

### **Ethical considerations**

First of all, written permission was taken from Ondokuz Mayıs University Social and Human Sciences Ethics Committee (Decision date: 25.02.2022, No: 2022/147) and Ondokuz Mayıs University Faculty of Health Sciences (Decision date: 04.03.2022, No: E-28050591-044-213518). Students who volunteered to participate in the research were informed about the aim and content of the study and their verbal consent was acquired for their participation. It was announced that to obtain accurate data, it is not mandatory to specify a name in any data collection form except the consent form, and all information will remain confidential. It is stated that the data will just be

used within the scope of the research and confidentiality will be strictly ensured. Throughout the study, the ethical principles outlined in the Helsinki Declaration were upheld.

### Statistical analysis

The data of present study were evaluated with the IBM SPSS (Statistical Package for the Social Sciences) 25.0 software package program. Frequency distributions and descriptive statistics were provided for categorical and numerical variables, respectively. The conformity of the variables to the normal distribution was tested with the Kolmogorov-Smirnov test with skewness and kurtosis values. Since the data were normally distributed, the Fisher Exact test, Chi-square test, independent samples t-test, Pearson correlation test, and simple linear regression analysis. The statistical significance level was accepted as  $p < 0.05$ .

### Results

Table 1 contains the socio-demographic characteristics of midwifery students participating in the study.

The students' mean age was  $20.84 \pm 2.31$  years, all of them were women, 54.1% had first grade, 2.7% had married and 85.2% had chosen the midwifery department willingly. First and fourth grade students are like each other in terms of sociodemographic characteristics ( $p > 0.05$ ). Table 2 gives the averages of students' Solution Focused Inventory and Solution Focality in Communication Scale scores. The first and fourth-year midwifery students' solution-focused inventory ( $49.40 \pm 6.78$ ;  $51.8 \pm 97.40$ , respectively) and solution focality in communication scale ( $63.62 \pm 6.31$ ;  $65.71 \pm 6.72$ , respectively) score averages were determined. There is a statistically significant difference between first-and fourth-year midwifery students' levels of solution-focused thinking and communication ( $p = 0.019$ ,  $p = 0.033$ , respectively). The goal orientation and resource activation subscale levels of fourth-grade students are higher than those of first-grade students. The difference is statistically significant ( $p = 0.020$ ,  $p = 0.007$ , respectively). Similarly, the solution-focused approach in communication subscale levels of fourth-grade students is higher than first-grade

students. The difference is statistically significant ( $p = 0.005$ ) (Table 2).

Table 3 shown the correlation coefficients between SFI and SFCS mean scores of the participants. In the study, a statistically significant weak positive relationship was observed between the SFI total scores and the SFCS total scores of first- and fourth-grade students ( $r = 0.269$ ,  $p = 0.007$ ;  $r = 0.419$ ,  $p = 0.000$ , respectively). (Table 3).

Linear regression analysis related to the prediction of the SFCS by the SFI is given in Table 4. Simple linear regression analyses indicated that students' solution-focused thinking skills were significant predictors of their solution-focused communication and explained 13.1% of the variance ( $F = 27.272$ ,  $p = 0.000$ ) (Table 4)

### Discussion

The study purposed to evaluate solution-focused thinking skills and solution-focused communication levels of first and fourth-grade midwifery students and to identify the factors affecting these variables in addition to the relationship among them.

In this study, the solution-focused thinking skills of the students were evaluated using the "Solution Focused Inventory". The solution-focused thinking talents of first ( $49.40 \pm 6.78$ ) and fourth ( $51.89 \pm 7.40$ ) grade students were found to be above average. According to the literature review, studies using SFI in students in midwifery<sup>7</sup> and nursing<sup>9,22</sup> are rather limited. In Kaya and Guler's<sup>7</sup> study, the average SFI score of midwifery students was found to be  $49.63 \pm 5.72$ . According to recent research, the average SFI score of nursing students is  $48.23 \pm 8.71$ <sup>9</sup> and  $46.47 \pm 11.20$ .<sup>22</sup> The mean SFI score of the students of the faculty of education outside the healthcare department, the students were found to be  $50.3 \pm 7.71$ .<sup>23</sup> According to these findings, the students' solution-focused thinking talents were determined to be above average. This study's findings are like the literature. In this study, it was found that fourth-year midwifery students had higher SFI score mean than first-year students. This difference is statistically significant ( $p = 0.019$ ). Similarly, Ozturk Copur *et al.*<sup>22</sup> state that the SFI mean score of fourth-year nursing students was higher.

**Table 1:** Distribution of some socio-demographic characteristics of students (n=183)

Characteristics	Total (n=183)	Term First grade (n=99)	Fourth grade (n=84)	Statistical analysis
	n(%)	n(%)	n(%)	<i>p</i> <sup>a</sup>
<b>Last graduated degree</b>				
High school	164 (89.6)	88 (88.9)	76 (90.5)	0.726
Undergraduate	19 (10.4)	11 (11.1)	8 (9.5)	
<b>Marital status</b>				
Married	5 (2.7)	2 (2.1)	3 (3.6)	0.521
Single	178 (97.3)	97 (97.9)	81 (96.4)	
<b>Family type</b>				
Nuclear family	141 (77.0)	73 (73.7)	68 (81.0)	0.247
Extended family	42 (23.0)	26 (26.3)	16 (19.0)	
<b>Family income status</b>				
Income less than expenses	68 (37.2)	30 (30.3)	38 (45.2)	0.114
Income equal to expenses	105 (57.4)	63 (63.6)	42 (53.6)	
Income more than expenses	10 (5.4)	6 (6.1)	4 (1.2)	
<b>Midwifery department preference status</b>				
Willingly	156 (85.2)	87 (87.9)	69 (82.1)	0.276
Unwillingly	27 (14.8)	12 (12.1)	15 (17.9)	

<sup>a</sup>= Chi-Square test; Fisher Exact test.

**Table 2:** Students' solution-focused inventory (SFI) and solution focality in communication scale (SFCS) score averages

Score Averages of the Scales	Grade		<i>t/p</i>
	First grade $\bar{X} \pm SS$	Fourth grade $\bar{X} \pm SS$	
<b><i>Solution Focused Inventory</i></b>			
<b>Total</b>	49.40±6.78	51.89±7.40	-2.370/0.019*
Problem disengagement	14.57±3.46	14.78±3.83	-0.389/0.698
Goal orientation	16.66±3,51	17.82±3,07	-2.345/0.020*
Resource activation	18.16±2.82	19.28±2.76	-2.709/0.007*
<b><i>Solution Focality in Communication Scale</i></b>			
<b>Total</b>	63.62±6,31	65.71±6.82	-2.147/0.033*
Solution-Focused Intervention in Communication	31.31±3.48	31.95±3.85	-1.178/0.240
Evaluation Solution Opportunities in Communication	18.21±2.45	18.86±2.66	-1.733/0.085
Solution-Focused Approach in Communication	14.10±1.84	14.89±1.88	-2.863/0.005*

t= Independent Samples t Test; \* *p* <0.05 The difference is statistically significant.

**Table 3:** Correlation coefficients between Solution-Focused Inventory (SFI) and Solution Focality In Communication Scale (SFCS) mean scores

Term	SFCS total	<i>r</i>	<i>p</i>
First grade SFI total		0.269	<b>0.007*</b>
Fourth grade SFI total		0.419	<b>0.000*</b>

r=Pearson Correlation Test (r=0.00-0.25 very weak, r=0.26-0.49 weak, r=0.50-0.69 moderate, r=0.70-0.89 high, r=0.90–1.00 very high) \**p* <0.01, The difference is statistically significant.

**Table 4:** Linear regression analysis related to prediction of the SFCS by the SFI

Variables	$\beta$	Std. error	$\beta$	$t$	$p$
Fixed	47.698	3.266		14.605	0.000*
SFI	0.334	0.064	0.362	5.222	0.000*

R = 0.362, R<sup>2</sup> = 0.131, F = 27.272, p = 0.000  
 SFI: Solution Focused Inventory, SFCS: Solution Focality in Communication Scale, Dependent variable:  
 SFCS, significance variable for \*p < 0.05,

The high mean scores of fourth-grade students reveal that they learn problem-solving skills throughout the curriculum. In this study, the solution-focused communication skills of the students were assessed using the "Solution Focality in Communication Scale". The solution-focused thinking talents of first (63.62±6.31) and fourth (65.71±6.82) grade students were found to be above average. In this study, it was indicated that fourth-year midwifery students had a higher SFCS score mean than first-year students. This difference is statistically significant. In the literature review, there was no study using SFCS. But there are researches using the "Communication Skills Evaluation Scale" with midwifery students.<sup>24,25</sup> According to Ozcan *et al.*,<sup>25</sup> there is no statistically significant difference between students' communication skills based on grade level. Ertekin-Pinar *et al.*,<sup>24</sup> in their follow-up study of midwifery students' communication skills over the years, it was revealed that there was a statistically significant difference among communication skills according to grade level. The students' communication skills average scores were highest in the first grade. These findings in the studies may be since the communication course is included in the midwifery curriculum in the first year. It is also known that communication training based on a solution-focused approach improves nurses' communication skills,<sup>26</sup> and education based on a solution-focused approach improves the therapeutic skills of nursing students.<sup>27</sup> For this reason, solution-focused thinking levels may have contributed to the higher mean score of solution-focused communication in fourth-year midwifery students in present study.

In present study, there is a significant positive relationship between the SFI and SFCS score averages of first-and fourth-year midwifery students. Students' solution-focused thinking skills are an important predictor of their solution-focused

skills in communication. No research has been found in the literature that examines the relationship between solution-focused thinking skills and solution-focused levels of communication. There is no research in the literature that assesses the association between solution-focused thinking and solution-focused communication. Various studies indicate that a significant positive relationship has been discovered between solution-focused thinking and hope,<sup>7</sup> self-efficacy,<sup>9</sup> and problem-solving.<sup>10</sup>

Solution-focused thinking refers to the ability to approach problems by focusing on finding solutions rather than standing on the problem itself.<sup>4</sup> Problem-solving, critical thinking, empathy, and communication skills in the midwifery curriculum may have contributed to these results. Based on these results, it is thought that curriculum planning to improve students' solution-focused thinking and solution-focused communication levels can have a greater mutual impact on these variables. Including a solution-focused approach course in the midwifery department can help students develop their solution-focused thinking and communication skills. Javid *et al.*,<sup>28</sup> indicated that solution-focused counseling was effective in enhancing the mental health of midwifery students

## Conclusion

The results of present study showed that midwifery students' SFI and SFCS were above the mean score. Moreover, there was a strong relationship between the SFI and SFCS. Students with high solution-focused thinking skills also had a higher solution-focused communication. A solution-focused midwife communicates more effectively with the woman she cares for and her family and teaches them to think about effective solutions that aid them deal with their problems. Thus, the quality of midwifery care and satisfaction with care increase. In this context, it is recommended to integrate a

solution-focused approach course into the midwifery curriculum. Additionally, further studies should be conducted on midwifery students' solution-focused thinking and solution-focused communication skills.

University education can increase the midwifery and nursing workforce with high 21st-century skills. Midwives who have high solution-focused thinking, problem-solving skills, and communication skills, and contribute to the improvement of mother and baby health. Improving maternal and child health contributes to sustainable development goals. It is recommended to add courses to the midwifery and nursing curriculum that will increase students' solution-focused thinking and communication levels. Likewise, present study may offer insights for midwives and nurses into solution-focused midwifery and nursing education to overcome solution-focused thinking and communication barriers and strengthen their relationships in healthcare settings.

## Strengths and limitations

There are limited studies scoping the solution-focused thinking skills in midwifery students. However, there are no studies scoping solution-focused communication skills. The strength of this study is that it is the first study to examine the solution-focused thinking and communication skills of midwifery students. On the other hand, since the study was conducted in a single center, the findings cannot be generalized to all midwifery students. This is also a limitation of the study

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