

The Midwifery Students Vocational Belonging Levels and Affecting Factors Determination

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Abstract

Objective: This study was conducted to evaluate the professional affiliation of midwifery students.

Methods: This study is descriptive and cross-sectional. The research was conducted between 01.03.2020-01.04.2020 at a state university in southern Türkiye, Department of Midwifery. Sample Size Calculator -Australian Calculated by Bureau of Statistics. In the calculation, the number of samples was determined as 198. The population of the research consisted of a total of 200 students studying in the midwifery department of the relevant faculty in the 2019-2020 academic year. Data were collected with the "Personal Information Form" and "Midwifery Belonging Scale". The scale consists of 22 items and the Cronbach- α coefficient is 0.936. The data were evaluated using the Mann-Whitney U test (Z-table value) and Kruskal -Wallis H test method and Bonferroni correction from the SPSS 24 package program.

Results: The average age of the students is 20.64 ± 1.56 years and 74.0% of them stated that their family was at the middle income level. It was determined that 69.5% of the students chose the profession willingly, 83.5% loved their profession, and 41.0% had positive thoughts about the midwifery department before starting school. It was determined that the average score of all students on the Midwifery Belonging Scale was 88.47. There is a statistically significant difference between the students' scores on the Midwifery Belonging Scale and their class, age, choosing the profession voluntarily, liking the profession, and their thoughts about the midwifery department before starting school ($p < 0.05$).

Conclusion: In the study, it was determined that the students' midwifery affiliation levels were high. Students' class, age, choosing the profession willingly, liking the profession, and their thoughts about the midwifery department before starting school are factors that affect their level of professional belonging.

Key words: Belonging, Midwifery, Midwifery students, Professional belonging

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Introduction

The sense of belonging that people need to be accepted in social life has existed since the birth of humanity (1, 2). People want to belong to a person, group, place, profession, culture or a community through belonging and identification (3). Belonging; It contributes to the development of the person by developing the sense of trust, care and compassion in people and playing an important role in establishing healthy interpersonal relationships (4, 5).

Professional belonging, which is within the scope of the concept of belonging, constitutes the building block of the attitudes and behaviors that people show in their professional lives (6). Professional affiliation; It can be defined as a person's interest in the profession, his internalization of his profession and his ability to continue his profession (7). The extent of professional affiliation may vary from person to person due to different reasons. The person's position in the profession, working conditions, working hours and salary can be cited as among these reasons (8). All reasons affecting professional belonging directly affect people's success and performance in the profession (9). A low level of sense of professional belonging negatively affects a person's professional success and performance (10). This negative effect is reflected not only in the

person's professional life but also in his daily life (11). It is seen that in people with a high, as opposed to a low, sense of professional belonging, their professional success, performance and motivation are positively affected, and therefore their work efficiency increases (12). Midwifery is a professional profession that requires direct communication with the people it provides care for and continues its development within the framework of evidence-based practices, science, art and ethics (13). Due to the harsh working conditions in this profession, midwives who will work in the field must have a high level of professional affiliation in order to do the profession with dedication (14). A midwife's embrace of her profession, her ownership of her profession, and her ability to practice her profession devotedly and in accordance with the procedure show her midwifery affiliation. Therefore, more studies are needed in this field to fully define and interpret professional belonging (15). In this direction, a standard measurement tool was recently developed to determine the professional affiliation levels of midwives working in clinics (7). It is very important to know the professional affiliation levels of not only the midwives working in the clinic, but also the midwifery students receiving undergraduate education who will practice

the profession in the near future. When studies on midwifery students' sense of professional belonging were examined in the literature, it was determined that there were very few studies on the subject (16-18). Therefore, in this study we conducted, midwifery students' professional affiliation levels and affecting factors determination is intended.

Methods

Objective and type of research

This study examines the professional affiliation levels of midwifery students and their affecting factors. It was conducted cross-sectionally between 2-30 March 2020 to determine the population.

Population and sample of the research

This study, 2-30 March 2020 between At the relevant university Midwifery in the Department has been made of research universe, related of the faculty midwifery 2019-2020 education in the department (1st Grade: 80, 2nd Grade: 89, 3rd Grade: 72 and 4th Grade: 86) seeing total 327 students has created. sample size by "Sample Size Calculator-Australian Bureau of Statistics" has been calculated. 5% error in calculation share and 95% confidence in the range designated sample The number is 180. data loss could be eyelash in front when it is found student The number of students increased by 10% to 18 students. more

sampling including has been is sample number as 198 has been determined. The research was done of the faculty midwifery in every class of the department education seeing student numbers eyelash in front by keeping proportional sampling method from all classes with will be taken student number has been determined. The population of the research consisted of a total of 200 students studying in the midwifery department of the relevant faculty in the 2019-2020 academic year. Data were collected with the Personal Information Form and the "Midwifery Belonging Scale".

Criteria for inclusion in the study:

- Midwifery department students were included in the research.

Collection of data

This study of the data were collected face to face through a questionnaire that included the "Personal Information Form", in which the factors affecting professional belonging were questioned, and the "Midwifery Belonging Scale", which was used to determine the level of belonging.

Data collection tools

Two data collection tools were used to collect the data: "Survey Form" and "Midwifery Belonging Scale".

Personal Information Form: *It was prepared* by the researchers in line with the literature (19, 20). This form contains a total of 13 questions including demographic information of the students.

Midwifery Belonging Scale: Midwifery Belonging Scale (EAS) is a 5-point Likert type scale consisting of 22 items and was developed by Baskaya et al. in 2020. The scale does not have a cut-off point or inverse item. The lowest score from the scale is 22 points and the highest score is 110 points. The scale consists of four factors and these factors are; They are called "Emotional belonging", "Fulfilling professional roles and responsibilities", "Evaluating professional development and opportunities" and "Limit of duty and authority in the profession".

The highest score that can be obtained for the emotional belonging dimension and the fulfillment of professional roles and responsibilities dimension in the scale is "35" and the lowest score that can be obtained is "7". The highest score that can be obtained for the professional development and opportunities evaluation dimension is "25" and the lowest possible score is "5". The highest score that can be obtained for the dimension of duty and authority limits in the profession is "15" and the lowest score that can be obtained is "3". It is accepted that as the score obtained from

the scale increases, people's professional affiliation levels increase (21). Baskaya et al. While the Cronbach Alpha Coefficient of the scale was found to be 0.900 in their study (22), the Cronbach Alpha Coefficient was found to be 0.936 in this study.

Evaluation of data

SPSS 24.0 (Statistical package for the Social Sciences) program was used. Descriptive, parametric and nonparametric statistical analysis methods were used to analyze the data. In descriptive statistical analyses, mean, standard deviation, median, frequency, percentage, minimum and maximum values were calculated. In comparing quantitative data, the Student t test will be used for two-group comparisons of normally distributed variables, and the Mann Whitney U test will be used for two-group comparisons of non-normally distributed parameters. In the comparisons of three or more normally distributed groups, One-way ANOVA was used for the variables where the assumption of homogeneity of variances was met. In the comparisons of three or more groups that were not normally distributed, the Kruskal Wallis test was used, and the Mann Whitney U test was used to determine the group that caused the difference. Significance value is $p < 0.05$ the ayes have it.

Ethical aspect of study

In order to conduct the study, the necessary permission was obtained from Cukurova University Faculty of Medicine Non-Interventional Research Ethics Committee (Ethics Committee Decision No:82). For the research, institutional permission and informed consent from the participants were obtained (informed consent was given to the students who will form the sample of the research to participate in the research within the scope of the principle of willingness and voluntariness by explaining the purpose, duration, benefits, and data collection tools of the research). Helsinki in the study the principles of the Declaration have been complied with.

Limitations of the study

One of the limitations of the study is only Studied at the relevant university, Department of Midwifery. Because it was done with students. The results have limited generalizability is that it is. In the research, the level of belonging in terms of demographic and descriptive characteristics Although evaluated, professional affiliation other parameters that may affect (The physical conditions of the university,

laboratory and access to equipment, classroom quotas, internship opportunities, etc.) The fact that it was not evaluated is a there are other limitations.

Results

The study was completed with 200 midwifery students who participated in the study. It was determined that the average age of the students participating in the study was 20.64 ± 1.56 (years) and 50.0% of them were in the 20-21 age group. It was determined that 97.5% of them were single, 54.5% of them lived with their families in the province, 49.5% of them lived with their families and 79.0% of them were in the nuclear family type. It was determined that 69.0% of the students had 2 or more siblings, 74.0% of their families were in the middle income level, and 74.5% were Anatolian high school graduates. 69.5% of the students chose the profession willingly, 83.5% loved their profession, 64.0% wanted to work as a midwife, 41.0% had a positive opinion about the midwifery department before starting school, and 57% said that It was determined that 5 of them had a sense of belonging to the midwifery profession between 5-7 (Table 1, Table 2).

Table 1. Distribution of student findings.

Variable (N=200)	%
Class	
1.	25.0
2.	25.0
3.	25.0
4.	25.0
Age classes [$\bar{X} \pm S.S. \rightarrow 20,64 \pm 1,56$ (yıl)]	
<20	22.5
20-21	50.0
≥ 22	27.5
Marital status	
Married	2.5
Single	97.5
Where the family lives	
Province	54.5
District	32.5
Bay	13.0
Current place of residence	
with family	49.5
At home	10.5
in dormitory	40.0
Family type	
Sunflower seed	79.0
Wide	12.0
Broken	9.0
Sibling presence	
None	4.5
one	26.5
2 and above	69.0
Family income level	
Good	11.0
Middle	74.0
Bad	15.0
Graduated high school	
Straight	11.0
Job	6.0
health profession	8.5
Anatolia	74.5
Choosing a profession willingly	
Yes	69.5
No	30.5
Don't like the profession	
Yes	83.5
No	16.5
Position desired to work in midwifery*	
As a midwife	64.0
As a nurse	10.5
Academically	24.0
Doesn't want to work in the healthcare field	10.5
Consideration of midwifery department before starting school	
Positive	41.0
Negative	21.0
he had no idea	38.0
Sense of belonging to the midwifery profession*	
<5	10.5
5-7	57.5
8-10	32

Table 2. Distribution of findings regarding the scale.

Scale (N=200)	Average	Standard deviation	Median	Min.	Max .
Midwifery Belonging Scale	88.47	14.78	90.5	22.0	110.0

The findings regarding the students' answers to the scale are given in the table.

A statistically significant difference was detected in terms of MBS scores according to classes ($\chi^2=26.099$; $p=0.000$). As a result of Bonferroni corrected pairwise comparisons made to determine which group caused the significant difference; A significant difference was detected between those studying in the 1st grade and those studying in the 2nd and 4th grades. MBS

scores of students studying in the 1st grade are significantly higher than those studying in the 2nd and 4th grades. Likewise, a significant difference was detected between those studying in the 3rd grade and those studying in the 2nd and 4th grades. MBS scores of students studying in the 3rd grade are significantly higher than those studying in the 2nd and 4th grades (Table 3).

Table 3. Comparison of midwifery affiliation scale scores according to student findings.

Variable (N=200)	n	Midwifery Belonging Scale		Statistical analysis* Possibility
		$\bar{X} \pm S. S.$	Median [IQR]	
Class				
1.	50	91.58 \pm 14.58	95.5 [16.3]	$\chi^2=26.099$ $p=0.000$ [1-2,4] [3-2,4]
2.	50	85.52 \pm 13.71	86.0 [17.8]	
3.	50	94.48 \pm 14.50	98.5 [18.3]	
4.	50	83.12 \pm 13.93	83.0 [21.0]	
Age classes				
<20	45	89.69 \pm 15.31	92.0 [18.0]	$\chi^2=12.464$ $p=0.002$ [1,2-3]
20-21	100	91.11 \pm 13.55	93.0 [19.0]	
≥ 22	55	82.67 \pm 15.13	83.0 [24.0]	
Where the family lives				
Province	109	90.28 \pm 14.60	92.0 [19.0]	$\chi^2=5.355$ $p=0.069$
District	65	85.09 \pm 15.49	85.0 [26.0]	
Bay	26	89.35 \pm 12.57	91.0 [20.3]	
Place of residence				
with family	99	89.12 \pm 15.06	91.0 [22.0]	$\chi^2=0.520$ $p=0.771$
At home	21	88.47 \pm 13.65	89.0 [19.5]	
in dormitory	80	87.66 \pm 14.85	90.5 [24.5]	
Family type				
Sunflower seed	158	88.15 \pm 15.34	90.0 [24.0]	$\chi^2=1.326$ $p=0.515$
Wide	24	91.30 \pm 11.91	92.0 [18.0]	
Broken	18	86.50 \pm 12.36	88.0 [16.5]	
Sibling presence				
None	9	84.56 \pm 11.08	83.0 [19.5]	$\chi^2=1.992$ $p=0.369$
one	53	88.06 \pm 14.24	90.0 [23.5]	
2 and above	138	88.88 \pm 15.22	91.0 [20.0]	

Table 3. Comparison of midwifery affiliation scale scores according to student findings (continued).

Family income level				
Good	22	89.90±13.21	93.0 [21.5]	$\chi^2=0.729$ p=0.694
Middle	148	88.99±13.87	91.0 [19.0]	
Bad	30	84.71±20.14	88.0 [24.0]	
Graduated high school				
Straight	22	90.59±14.42	92.0 [18.8]	$\chi^2=5.581$ p=0.134
Job	12	78.83±16.03	76.0 [32.0]	
Health profession	17	87.29±16.30	86.0 [25.0]	
Anatolia	149	89.07±14.40	91.0 [19.0]	
Don't want the profession				
Yes	139	91.94±13.82	94.0 [17.0]	Z=-5.418 p=0.000
No	61	80.58±13.92	81.0 [17.5]	
Don't like the profession				
Yes	167	91.08±13.74	93.0 [19.0]	Z=-5.716 p=0.000
No	33	75.24±12.76	77.0 [17.0]	
Midwifery idea				
Positive	82	90.72±16.21	94.5 [19.5]	$\chi^2=10.908$ p=0.004 [2-1,3]
Negative	42	82.24±16.09	81.0 [23.5]	
He had no idea	76	89.34±11.13	89.0 [14.5]	

*“Mann-Whitney U” test (Z-table value) when comparing the measurement values of two independent groups in data that does not have a normal distribution; “Kruskall -Wallis H” test (χ^2 -table value) statistics were used to compare three or more independent groups.

A statistically significant difference was detected in terms of EAS scores according to age classes ($\chi^2=12.464$; $p=0.002$). As a result of Bonferroni corrected pairwise comparisons made to determine which group caused the significant difference; A significant difference was detected between those in the <20 and 20-21 age groups and those in the ≥ 22 age group. EAS scores of those in the <20 and 20-21 age groups are significantly higher than those in the ≥ 22 age group.

A statistically significant difference was found in terms of EAS scores according to the opinion about the midwifery department before starting school ($\chi^2=10.908$; $p=0.004$). As a result of Bonferroni corrected pairwise comparisons made to

determine which group caused the significant difference; A significant difference was detected between those who previously thought negatively and those who thought positively and had no opinion. The EAS scores of those who think positively and have no opinion are significantly higher than those who think negatively.

A statistically significant difference was detected in terms of EAS scores depending on whether the profession was chosen voluntarily (Z=-5.418; $p=0.000$). EAS scores of those who chose the profession voluntarily are significantly higher than those who did not choose it voluntarily.

A statistically significant difference was detected in terms of EAS scores according

to the level of liking the profession ($Z=-5.716$; $p=0.000$). EAS scores of those who like the profession are significantly higher than those who do not like it.

There is no statistically significant difference in EAS scores according to current place of residence, family type, number of siblings and high school graduated ($p>0.05$).

Discussion

There is no cut-off point for the EAS used in this study to measure the belonging levels of the students participating in the study. According to the scale, an increase in the score indicates that belongingness increases, and a decrease indicates that belongingness decreases. The average midwifery affiliation score of the students included in our study was determined to be 88.47. Based on this, as a result of the research, it was determined that the average score of the students' belonging level was close to the upper limit of points that can be obtained from the scale. However, the students total scale scores were found to be the same in the study conducted by Baskaya and colleagues with working midwives. It was observed that the total score obtained with the scale was higher than the total score (21). This can be considered an indicator that the students who participated in the study felt like they belonged to the profession. In this study, midwifery

department Students' belonging levels and affecting factors were examined. In the literature, positive emotions are found to be an important determinant of belonging. It is reported that it is a feature (23). In this study, it was determined that almost all of the students had positive thoughts about the midwifery department and the students who had positive thoughts about the midwifery department had a high level of belonging to midwifery. It has been determined that the surface is higher. The results of this study support the literature. Satisfaction with career choice can be considered as a factor affecting the level of belonging. In a study conducted with midwifery students, approximately eight out of ten students stated that they did not like the midwifery profession but that they had to do it (20). In another study conducted with students, it was determined that half of the students believed that they would enjoy doing the profession (19). In a study conducted with working midwives, it was determined that seven out of ten midwives enjoy their job (24). In this study, it was found that most of the students had positive thoughts about the midwifery profession. Regarding wanting the profession, it was determined that 139 of the participants were willing to do the profession and their EAS score was 91.94 ± 13.82 . Regarding liking the profession, it was determined that 167 of the participants liked the midwifery profession

and their EAS score was 91.08 ± 13.74 . It was determined that 82 of the participants had positive opinions about midwifery and their EAS score was 90.72 ± 16.21 . In this context, there is a difference between the results of the study of Ay and his friends and Yücel and his friends and this study, and Yılmaz and his friends what he did It is seen that there is a similarity between the results of the study and this study (19, 20, 24). This difference and similarity can be interpreted as the fact that the midwifery profession has become popular over time because this study was conducted only with senior students. In addition, in this study, it was determined that the midwifery affiliation levels of students who believed that they would enjoy their profession were higher. Being fond of the midwifery profession is accepted as an indicator of belonging (19). The results of this study support the literature. Enjoying the midwifery profession can be an indicator of the level of belonging. The feeling of commitment is one of the factors that can be associated with belonging (23).

The reason for choosing the midwifery profession can be described as an important parameter of belonging, as it can affect the perception and success of the profession (20, 25, 26). In the literature, the reasons why students choose the midwifery department vary (19, 20, 27). As a result of

the qualitative research in which Cullen and her colleagues examined the students motivations for choosing the midwifery department, it was determined that one of the leading reasons was "witnessing midwifery". It has been revealed that "being born and hearing birth stories" (27). In this study, it was determined that more than half of the students chose the midwifery department willingly and after researching it. As a result of the study of Ay and her friends, it was seen that more than half of the midwifery students chose the profession voluntarily, which is parallel to the results of this study. It is reported (20). In this study, it was found that the midwifery affiliation levels of students who chose the profession voluntarily were higher than those who chose the profession for other reasons. Similarly, in the research conducted by Baskaya, it was determined that midwifery affiliation levels were higher in midwives who chose the profession because they loved it, compared to those who chose the profession for other reasons (21). According to these results, the reason for choosing a profession is a parameter that may be related to belonging.

It is thought that one of the factors that can be associated with the level of belonging of midwifery students is whether the students want to work in a job related to the field of midwifery. This research shows that there

are very few people who do not want to work in a field related to midwifery after graduation. While most of them want to work in a public hospital, there are also some who plan to work as academics or freelance midwives. The fact that there are students planning to work in various fields related to the midwifery profession suggests that their professional awareness is high. In the literature, a similar result to this result was reported by Evans and his friends in the senior midwifery department. In the research where they examined the career plans of students, it was found that almost all of the students planned to work as midwives, and most of these students applied to work in hospitals. It was determined that a small number of students planned to work as freelance midwives. Again, as a result of this research, it is seen that the belonging scores of those who want to work in a field other than midwifery are low (28). In parallel with this result, as a result of Baskaya's research, midwives working in out - of -field units had higher midwifery affiliation scores compared to midwives working in the maternity ward or public health field. It was found to be lower (21). In the light of the literature, the desire to work in fields specific to midwifery can be associated with belonging; It can be argued that working in different fields may negatively affect professional belonging. Belonging is a concept that can be important

not only in the learning process but also in the transition to working life in midwifery and the professional adaptation process. What St - Amand and his friends did in their study, they stated that students' sense of belonging can be increased by encouraging them to have this feeling (23). Therefore, midwifery students should be evaluated in this respect during the undergraduate education process and initiatives should be taken to increase their level of belonging. In this research, midwifery department Students' belonging levels and affecting factors were examined. A statistically significant difference was found in terms of the participants' current class level in which they are studying, their age, their thoughts about the midwifery department before starting the midwifery department, their willingness to choose the profession and their liking for the profession, in terms of Midwifery Belonging Scale scores, and the Midwifery Belonging Scale scores of these people were significantly higher. It is seen that it is high and there are factors affecting the levels of belonging. Since the quantitative method was adopted in the research, there is a limitation in determining the factors affecting the students ' belonging level. For this reason, prospective qualitative research will be supportive in explaining the relevant factors.

Conclusion

In our study, midwifery students have a high sense of belonging and the level of belonging is affected by factors such as the current class level in which they are studying, age, thoughts about the midwifery department before starting the midwifery department, the state of choosing the profession willingly and the state of liking the profession, and the EAS scores of these people are significantly higher. It was found to be. The concept of belonging in the midwifery profession can be described as a very important quality for both the clinic and the field. Developing professional belonging in students during their undergraduate education may be important in terms of maintaining midwifery belonging and ensuring satisfaction in business life in the future. It may be recommended to conduct more comprehensive future research on the factors affecting the belonging levels of midwifery students. In addition, qualitatively examining students' midwifery affiliation will contribute to a better understanding of this issue.

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