

Strengths, weaknesses, opportunities and threats (SWOT) analysis of maternity nursing course: A comparative study

Ayat Massoud Omar¹, Howieda Fouly²

Omar AM, Fouly H. Strengths, weaknesses, opportunities and threats (SWOT) analysis of maternity nursing course: A comparative study. *J Nurs Res Pract.* 2018;2(2): 30-36.

ABSTRACT

The analysis of strengths, weaknesses, opportunities and threats though SWOT is considered as an educational process or activities of an institution or medical education as a whole of a state or a nation.

Aim: To examine and compare strengths and weaknesses, opportunities and threats of maternity course from the viewpoints of students two models of Faculty of Nursing.

Methods: Comparative analytic design carried out in the Assiut and Al-fayoum

faculty of nursing, maternity departments during the academic year 2015/2016.

Results: The response rate of third year students was more than eighty percent from Al-fayoum faculty of nursing and more than fifty percent of students Assiut student (58.3%) in the study. There is a statistical significant difference in course objectives; innovation of methods used for teaching and the adequacy of the learning environment at (P. value=0.000) between participants.

Conclusion: The study was identified the gaps of achieving objectives of maternity course in both faculties. Recommendations: utilization of positive point and dealing with the negative points could be effective step in promoting the quality of the maternity education.

Key Words: Strengths; Weaknesses; Opportunities; Threats; Maternity course

INTRODUCTION

Nursing and midwifery courses are carried out in two parts theoretical and clinical content. Each part has specific features, the theoretical education leads to expansion and improvement of students' knowledge and clinical performance in addition to, clinical education eliminates requirements of the theoretical education (1).

Theoretical course introduces the study of the reproductive system, maternal and child health nursing. The study includes maternity care during healthy pregnancy with emphasis on physical safety and emotionally satisfying outcomes for both the mother and baby. Content addresses care of mother and baby from conception to postpartum as well as discharge and home care. Clinical course provides students practical experiences to apply fundamental principles and skills necessary to provide care for maternity and newborn clients. This experience is build up on previous skills using the nursing process. The student will provide care to one to two clients in non-complex nursing situations and have an experience in the labor and delivery suites, newborn nursery, and postpartum care. Consequently, that enriches the students with an effective theoretical and practical nursing education towards optimizing the quality of health care for women and neonates (2).

Therefore, the appreciation SWOT stands for Strengths, Weaknesses, Opportunities, and Threats. SWOT analysis is a tool for analyzing the current situation both internally (strengths and weaknesses) and externally (opportunities and threats). It provides helpful baseline information for a group that intends to focus on future vision or more analyze of a problem. So, students play a key role in the process of education based on analyzing of problems effectively (2).

The analysis of strengths, weaknesses, opportunities and threats though SWOT is considered as an educational process or activities of an institution or medical education as a whole of a state or a nation. It is an action research to improve the service provision and practice of the medical education system rather than to produce knowledge. It reveals development opportunities among many trends and techniques in strategic management. SWOT analysis has delight in consistent popularity. Not present in list of academics have also applied SWOT to open new avenues for strategic research. The

integrity and profitability of the organization could be jeopardizing by threats from outside the organization (3).

Assessment is a systematic process that the value of teaching and learning is judged through collecting data, summarizing, interpreting and using them in order to identify the success of one's action. Although, assessment is done at the end of the program, it is the worst time to assess.

Assessment after education is a weak and dangerous idea because of collecting data may be impossible, incomplete and even wrong at this point of time. Periodical assessment allows the educator to be informed of the progress in students' plans. On the other hand, reacting continuously and following the plans are one of the clinical educator's duties (4).

The goal of curriculum evaluation is to ensure that the curriculum is effective in promoting improved quality of student learning. Student assessment therefore connotes assessment of student learning. Assessment of student learning has always been a powerful influence on how and what teachers teach and is thus an important source of feedback on the appropriateness implementation of curriculum content (5).

Good educational environment is crucial for effective learning process; in addition, it has a strong effect of the students' learning. On the other hand, in order to improve human health, nursing profession now is required to address the challenges which globally standardized and facilitate knowledge sharing through forming of international alliances (6). Improving the health and protection of patients in any health foundation initiates with the effectiveness of health care providers through training of nurses which is essential for these initiatives (7). Furthermore, learning environment defined as all didactic activities done in the classrooms, departments, faculties and universities which also perceived via the students as well as by the teachers, based on three important components: the physical environment, intellectual and emotional climate (8).

SIGNIFICANT OF STUDY

Good learning certainly associated with the gaining knowledge of environs, which sequence affects the experiences and learning outcomes for Students. The evaluation of the student view of the maternity course at the faculty of

¹Department of Maternity and Neonatal Health Nursing, Fayoum University, Egypt, ²Department of Obstetrics and Gynecologic Nursing, Assiut University, Egypt.

Correspondence: Howieda Fouly, Department of Obstetrics and Gynecologic Nursing, Assiut University, Egypt. Telephone: (+20)01011993216, email: hoida_elfouly@yahoo.com
Received: May 03, 2018, Accepted: May 14, 2018, Published: May 27, 2018



This open-access article is distributed under the terms of the Creative Commons Attribution Non-Commercial License (CC BY-NC) (<http://creativecommons.org/licenses/by-nc/4.0/>), which permits reuse, distribution and reproduction of the article, provided that the original work is properly cited and the reuse is restricted to noncommercial purposes. For commercial reuse, contact reprints@pulsus.com

nursing help educators and staff in measuring the quality of learning that occurs within this vital place. Critically, we are needing to measure both the education and environment change. Although students' perception of the learning environment has been studied and reported globally we are unaware of any reports on nursing students' evaluation to their studying environments in Egypt. Therefore, the researchers decide to carry this study. Since the student is the important member in the process of education. Thus, the authors in the current study focused on evaluation the strengths and weaknesses, opportunities and threats of maternity course from the viewpoints of all students as a first step for make an adjustment.

AIM OF THE STUDY

This study aimed to examine and compare strengths and weaknesses, opportunities and threats of maternity course from the viewpoints of all students of Assiut and Al- Al-fayoum Faculty of Nursing.

SUBJECTS AND METHOD

Study Design

Comparative analytic design was used to conduct this study.

Study Setting

This study was carried out in the Assiut and Al-fayoum faculty of nursing, maternity departments during the academic year 2015/2016.

Subjects

One hundred and forty of third year nursing students studying maternity courses 70 (58.3%) student from Assiut & 70 (82.3%) of students from Al-fayoum) Participants received an explanatory statement detailing the study and were informed that all information collected might remain nameless.

Tool of data Collection

Questionnaire consists of three parts:-

A- First part related to students' evaluation of theoretical part of maternity curriculum and consists of six domains;

1. The students' evaluation of the course objectives (relevancy, organization, clarity and specificity)
2. Lectures & methods of teaching (Appropriateness, availability, time sufficiency, innovation and advancing)
3. Source of curriculum (Innovation, quality, completion, and ease ability)
4. Evaluation methods (appropriateness, objectivity, diversity, relevancy, and time efficiency)
5. Teacher (capabilities and skills, flexibility and patience)
6. Learning environment (The adequacy, equipped, healthy, and appropriateness).

B- Second part related to student's evaluation of clinical part of maternity curriculum and consists of three domains;

1. Clinical Course (planned, relevant to future professional, acquisition of new skills, opportunities to re-application of the practical skills, time efficient)
2. Teacher/clinical instructor (sufficient competences, skills, flexibility and patience, efficiency and Potentials)
3. Learning environment (The adequacy, equipped, conveniently, efficiency capacity, usability, and maintenance)

A four-point rating scale (fair, good, very good, excellent) has been utilized.

C- Part three consists of open questions about SWOT of the maternity curriculum.

Administrative design

An official approval was obtained after permission from the dean of the faculty of nursing at Al-fayoum University & Assiut University.

Ethical consideration

The study protocol was approved by pertinent research and ethical committees. Informed consent was taken from every student before

inclusion in the study. Participants were assured that all their data are highly confidential, anonymity was also assured through assigning a code number for each student instead of names to protect their privacy. Data was only available to the researchers and the participants.

PROCEDURE

The procedure was started at the end of the year after completion of semester. A covering letter was attached to the questionnaire indicating the aim of the study. Then a self-directed validated Arabic model of the questionnaire was administered to nursing students. All inquiries of students were verified by researchers in both faculties during their fill in questionnaire. After completing the questionnaires, all of it collected for statistical analysis.

STATISTICAL ANALYSIS

The data were tested for normality using the Anderson-Darling test and for homogeneity variances prior to further statistical analysis. Categorical variables were described by number and percent (N, %), where continuous variables described by mean and standard deviation (Mean, SD). Chi-square and fisher exact tests used to compare between categorical variables where compare between continuous variables by t-test. A two-tailed $p < 0.05$ was considered statistically significant. All analyses were performed with the IBM SPSS 20.0 software.

RESULTS

The response rate of third year nursing students was 70 out of 85 (82.3%) from Al-fayoum faculty of nursing and 70 out of 120 students Assiut student (58.3%) in the study. Findings of the study illustrated in the following tables and figures.

Table 1 shows that there was an obvious significant statistical difference regarding feedback of students among studied groups. The feedback was including, the relevancy and clarity of theoretical; course objectives; the appropriateness; availability; innovation of methods used for teaching and the adequacy; equipped; healthy; appropriateness of the learning environment with a statistical significant at (P. value = 0.001 & 0.001 & 0.000) respectively. In spite of there was difference between the percentages of reported scores of feedbacks of students regarding curriculum source; capabilities and skills of the teacher and methods used for evaluation of theoretical curriculum, but no significant statistical difference was noted (P. value= (0.011, 0.029 & 0.020).

Table 2 demonstrates that (n=21) (60%) of students in Assiut faculty rating clinical course of maternity according to (planning, relevant to future professional, acquisition of new skills, opportunities to re-application of the practical skills, time efficient) with very good score meanwhile nearly half of students (49.3%) in Al- fayoum faculty rating it with fair degree with a statistical significant difference at (P. value = 0.006). Also (56.0%) of Assiut faculty reported that sufficiency, capabilities and skills, efficiency, Potentials of clinical instructor was very good vs. 46.7% of Al-fayoum faculty students rating the clinical instructor with good score with significant statistical difference at (P. value = 0.001). Moreover, the evaluation of students regarding Learning environment (The adequacy, equipped, conveniently, efficiency capacity, usability, maintenance) was significantly statistically different (P. value = 0.001) among both groups (61.3% very good in Assiut vs. 56.0% faire in Al- fayoum faculty).

Comparison of course's strengths among studied groups. It illustrates that studying maternity course possess many of strength points, some of these strengths revealed a statistical significant difference at (P. value = 0.001 & 0.002 & 0.001 & 0.005 and 0.008) respectively in both studied groups with high percentage among Assiut faculty in their clear plan of the curriculum (93.3% vs. 48.0%) content covered and appropriate (49.3% vs. 24.0%) using of modern teaching approach (58.7% vs. 28.0%) staff's theoretical & clinical follow up of educational process (44.0% vs. 21.3%) and acquisition of professional skills relevant practical life (93.3% vs. 48.0%) respectively (Figure 1).

Table 3 shows that a lot of weakness points were reported from the evaluation of students to clinical maternity course among both faculties but with higher percentages in Al-fayoum faculty as lack of laboratory rooms (30.7% vs. 80.0%), areas for clinical training (40.0% vs. 86.6%), reliance on instructors from ancillary staff from other departments (13.3% vs. 60.0%), lack of updating clinical evaluation methods (48.0% vs. 72.0%), absence of objective criteria for practical tests was (52.0% vs. 80.0%), for insufficient equipment was (53.3 % vs. 93.3%) and high training burden on clinical instructors

TABLE 1:
Feedback of students regarding maternity theoretical course among studied groups

ITEM	Location				P. value
	Assiut		Al-fayoum		
	No.	%	No.	%	
THE COURSE OBJECTIVES (RELEVANCY, ORGANIZATION, CLARITY, SPECIFICITY)					
FAIR	4	5.3	10	13.3	0.001**
GOOD	11	14.7	27	36	
VERY GOOD	23	30.7	20	26.7	
EXCELLENT	37	49.3	18	24	
LECTURES & METHODS OF TEACHING (APPROPRIATENESS, AVAILABILITY, TIME SUFFICIENCY, INNOVATION, ADVANCED)					
FAIR	5	6.7	11	14.7	<0.001**
GOOD	10	13.3	37	49.3	
VERY GOOD	30	40	14	18.7	
EXCELLENT	30	40	13	17.3	
SOURCE OF CURRICULUM (NOVELTY, QUALITY, COMPLETION, EASE ABILITY, ADVANCED)					
FAIR	8	10.7	17	22.7	0.011
GOOD	20	26.7	12	16	
VERY GOOD	22	29.3	33	44	
EXCELLENT	25	33.3	13	17.3	
TEACHER (CAPABILITIES AND SKILLS, FLEXIBILITY AND PATIENCE)					
FAIR	5	6.7	11	14.7	0.029
GOOD	22	29.3	33	44	
VERY GOOD	29	38.7	22	29.3	
EXCELLENT	19	25.3	9	12	
EVALUATION METHODS (APPROPRIATENESS, OBJECTIVITY, DIVERSITY, RELEVANCY, TIME EFFICIENCY)					
FAIR	10	13.3	21	28	0.02
GOOD	25	33.3	31	41.3	
VERY GOOD	20	26.7	16	21.3	
EXCELLENT	21	28	9	12	
LEARNING ENVIRONMENT (THE ADEQUACY, EQUIPPED, HEALTHY, APPROPRIATENESS)					
FAIR	5	6.7	45	60	0.000**
GOOD	10	13.3	17	22.7	
VERY GOOD	20	26.7	9	12	
EXCELLENT	40	53.3	4	5.3	

** (Statistical significant difference)

revealed (52.0% vs. 80.0%) with higher significant statistical difference at (P. value = 0.001, 0.001, 0.001, 0.005, 0.001 & 0.001) respectively. In addition, regarding weak points of theoretical course also revealed significant statistical difference between participated groups due to regular revision of curriculum and revealed (42.7% vs. 66.6%) with a statistical significant at (P = 0.005). Lack capacity of classrooms and library to students revealed (40.0% vs. 89.3 %) with a statistical significant at (P. value = 0.001), Inadequate number of books and references revealed (46.7% vs. 88.0%) with a statistical significant at (P. value = 0.001) and lack of computers' labs for searching (60.0% vs. 100.0%) with a statistical significant at (P. value = 0.001) in Al-fayoum and Assiut respectively.

TABLE 2:
Feedback of students regarding maternity clinical course among studied groups

Item	Location				P. value
	Assuit		Al-fayoum		
	No.	%	No.	%	
Clinical Course (planned, relevant to future professional, acquisition of new skills, opportunities to re-application of the practical skills, time efficient)					
Fair	7	9.3	37	49.3	0.006**
Good	7	9.3	28	37.3	
Very Good	45	60	5	6.7	
Excellent	16	21.3	5	6.7	
Teacher /clinical instructor (sufficiency capabilities and skills, flexibility and patience, efficiency, Potentials)					
Fair	7	9.3	15	20	<0.001**
Good	12	16	35	46.7	
Very good	42	56	18	24	
Excellent	14	18.7	7	9.3	
Learning environment, the adequacy, equipped, conveniently, efficiency capacity, usability, maintenance)					
Fair	8	10.7	42	56	<0.001**
Good	12	16	22	29.3	
very good	46	61.3	10	13.3	
Excellent	9	12	1	1.3	

** (Statistical significant difference)

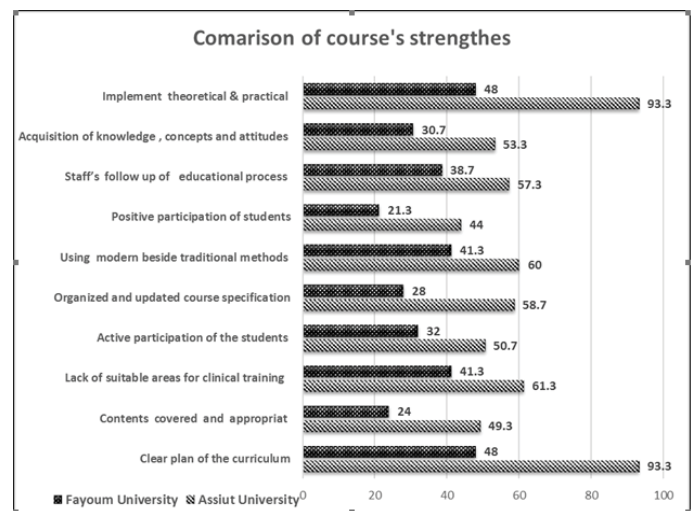


Figure 1: Comparison of course's Strengths among studied groups

Figure 2 revealed that two thirds of student (66.7%) in Assiut faculty found that the presence of continuous follow-up of the educational process through quality project in the faculty is an important opportunity for improvement with a statistical significant at (P. value = 0.021) that should be exploited whenever more than two thirds (73.3%) of students in Al-fayoum faculty reported that trying to work on electronic curricula and encourage student to electronic learning is the important opportunity with a statistical significant difference at (P. value = 0.018) respectively.

Table 4 shows that three fourths of students in Al-fayoum reported that the faculty rules & policies needs to deal with the problems of students (76.0% vs. 40.0%) and the majority of them facing Obstacles regarding policies of hospitals' directors for students training (90.7 % vs. 66.7%) with a statistical significant difference at (P. value = 0.002& 0.001) respectively. whenever there are some of threads reported by the students in both faculties with nearly comparable percentage that doesn't reveals statistical difference.

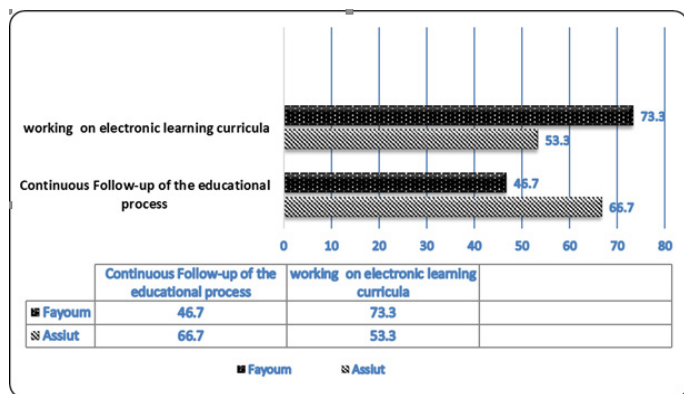


Figure 2: Opportunities of the maternity courses among studied groups

DISCUSSION

Learning takes place when students apply what they have learned in classroom situations and practiced in a simulation laboratory into the reality of nursing. Clynnes and Raftery defines feedback as a collaborative process of providing insight to learners about their performance. Therefore, feedback is a prerequisite for effective learning. Curriculum evaluation can be broadly defined as the “continuous systematic process of gathering information about all elements of a curriculum analysis and interpretation to help arrive at an understanding of the extent to which goals, objectives and outcomes have been achieved and subsequently take informed decisions for further improvement (9).

The current study considered one of pioneer studies in Egypt to use SWOT analysis of one course of nursing curriculum in two different faculties as examples for an old expert faculty and new recent faculty. So our study tries to figure out and compare its findings with available previous studies done on the similar and different courses in nursing curriculum.

TABLE 3: Weakness of the maternity courses among studied groups

Item	Weakness				P. value
	Assiut		Al-fayoum		
	No.	%	No.	%	
Curriculum is not revised regularly	32	42.7	50	66.6	0.005**
Lack of labs used for procedures demonstration	23	30.7	60	80	<0.001**
Lack of suitable areas for clinical training	30	40	65	86.6	<0.001**
Reliance on instructors from ancillary staffs	10	13.3	45	60	<0.001**
Lack of updating evaluation methods	36	48	54	72	0.005**
Absence of objective criteria for oral and practical tests	39	52	60	80	<0.001**
Lack of system that allows student access his mistakes in exams	39	52	42	56	0.739
Use exams to measure the level of academic achievement	40	53.3	41	54.6	0.992
Insufficient equipped labs	40	53.3	70	93.3	<0.001**
High training burden on clinical instructors	39	52	60	80	<0.001**
Unequal training opportunities for male students	36	48	52	69.3	0.013
Lack of periodical maintenance for equipment and simulators	37	49.3	40	53.3	0.744
Lack of classrooms capacity and library to students	30	40	67	89.3	<0.001**
Absence of CURRICULUM contents pertaining to the field of male STUDENTS	34	45.3	50	66.6	0.014
Inadequate numbers of books and references	35	46.7	66	88	<0.001**
Lack of computers ‘labs	45	60	75	100	<0.001**
Inadequate time for practice.	39	52	60	80	<0.001**
Male students not accepted to train on women’s speciality	33	44	48	64	0.022
Increase the number of students	70	93.3	69	92	0.998
Insufficient supervision in training location places	40	53.3	65	86.6	<0.001**
Lack of follow-up and continuous assessment due to insufficient staff members	44	58.7	60	80	0.008**

*(Statistical significant difference)

TABLE 4: Threats of maternity course among studied groups

Item	Threats				P. value
	Assiut		Al-fayoum		
	No.	%	No.	%	
Lack of employment scope for male students	33	44	40	53.3	0.317
Unequal training opportunities male vs. female students	40	53.3	45	60	0.509
Faculty rules & policies in dealing with the problems of students’ needs	30	40	57	76	0.002**
Lack of male student’s desire to study obstetrics curriculum	30	40	45	60	0.022
Absence of training & job opportunities for male’s students	40	53.3	45	60	0.509
Obstacles’ policies of hospitals’ directors for students training	50	66.7	68	90.7	<0.001**

** (Statistical significant difference)

The current findings revealed that there were obvious significant statistical differences regarding feedback of students among studied groups regarding course of maternity nursing objectives, methods of teaching and learning environment. This difference due to more than one third of students in Assiut University evaluated the previous items with "very good" and excellent versus "faire" and "good" in Al-fayoum group. However, the capability characteristics of teacher was shown as very good by more than one third of Assiut students vs. good in Al-fayoum. Moreover, the relevancy and objectivity of evaluation methods were scored with "good" among both groups.

In the same line Mandirav et al. supported the current results when reported that more than one third of the respondents indicated that the objectives of the community health nursing course were "very good" while only 2% found it as poor and fair. Likewise, more than one third of respondents indicated that the methods were very good but 10% found that it was fair. Further, 23% of respondents found the teaching methods materials average but 5% of the respondents found it poor, more than one third of the respondents indicated that the evaluation methods were "good" but 3.2% found it poor.

Another study conducted by Essawi, pointed out that the most satisfying aspects of studying maternity nursing reported that more than two thirds students confirmed that theoretical contents characterized by comprehensiveness nature (10). For emergency situation, two thirds of students respond that they learned how to deal with high risk pregnant mothers and only thirteen percent gained skills of caring for mother in labor and delivery which reflected a shortage in gaining practical skills due to poor facilities and limitations faced our students in clinical areas in hospitals.

Regarding students' feedback of maternity clinical course, the findings of the current study found that more than half of students in Assiut faculty rating clinical course of maternity according to (planning, relevant to future professionalism, acquisition of new skills, opportunities to re-application of the practical skills, time efficient) with "very good" score while nearly half of students in Al-fayoum faculty rating it with "fair" degree with a statistical significant difference.

Anees et al. in their study displayed that the evaluation of student's clinical experience during training in maternity course revealed that nearly one-third of the participants (35.1%) described it as an interesting course, and almost one-third of them (29.9%) described it as embarrassing for the male students' nurse (11). Also, findings showed that one-fifth of the participants (19.5%) described it as boring course, and fifteen percent said it was a very effective course. Moreover, the current findings reported that more than half of students at Assiut faculty reported that their evolution to sufficiency, capabilities and skills, efficiency, Potentials of clinical instructor was "very good" versus nearly half of Al-fayoum faculty students rating the clinical instructor with "good" score with significant statistical difference.

Different studies conducted by Hickey 2007; Saarikoski et al., Papastavrou et al. concluded that clinical supervision is an important element in facilitating learning in the clinical setting (12). Likewise, the findings reported by Lambert and Glecken, study which reported that supervision by clinical teachers in clinical environment is vital for students learning (13). Clinical nurse educators 'role is to enhance learning through provision of opportunities for learning. Supporting, guiding and conducting timely and fair evaluations. However, in these studies, students felt that this role is not fulfilled completely because clinical nurse educators spend more time in evaluation than supervision which is could be done by nursing staff who lack teaching experience and may not know the needs of the students.

In addition, Maben, Chuan and Barnett reported that heavy workload and attitudes of staff compromised supervision and the clinical performance increases if students are given necessary support in the clinical environment (14,15). More over Ildarabadi et al. who studied the nursing student's perception of the community health nursing training pointed out in that nursing students have an incorrect attitude towards the community health nursing training (16).

As well, in a study conducted by Girija, on Omani nursing students who perceived professional competence of clinical teachers' as the most important characteristic (77.6%), followed by teachers' relationship with students 72.9% and fifty percent rated personal attributes as highly important (17).

Therefore, Warn et al. it was evident in the literature that there were variations on supervisory models from country to country for example a study conducted in European countries showed these variations (18). Students are satisfied with regular Supervisory discussions and mentorship

which provide individualized supervision Papastavrou et al. and Warn et al. (12,18). This interpreted by advanced level of nursing education evident by precise planning for clinical training and supervision abilities.

Moreover, more than two thirds in Assiut university group confirmed that learning environment (adequacy, equipped, conveniently, efficiency capacity, usability, and maintenance) evaluated as "very good" versus more than half rated "faire" in Al-fayoum group with statistical significant difference among both groups). This difference between two studied groups interpreted by the novelty of the Al-fayoum faculty and the shortage its resources. Similarly, Frankel pointed out that the clinical learning environment can influence nursing students learning positively or negatively, a conducive clinical learning environment is one that is supportive with good ward atmosphere and good relationships and is perceived to produce positive learning outcomes (19).

Correspondingly a study of Pap et al. and Edwards et al. reported that learning environment positively influences on staff reactions where they acted in happy, friendly with good moral and attitude, cooperative and willing to teach and guide students provide quality patient care (20,21). This interpreted by availability of well facilitated environment which has a positive impact on nursing staff vice versa when the environment has a shortage in human being facilities that tend to impact negatively on nursing staff and appeared in the form of nervousness, boring and low productivity in work environment.

In relation to strength points of studying maternity course, the students in both studied groups viewed that maternity course possess many of strength points some of these strengths revealed a statistical significant difference with high percentage among Assiut faculty such as clear plan of the curriculum content covered and appropriate using of modern teaching approach staff's theoretical and clinical follow up of educational process and acquisition of professional skills relevant practical life. This difference returned to sufficient capabilities, budget and Infrastructure staff members of the faculty. In contrast with these findings Zane et al. who conducted study on the strengths and weaknesses of faculty teaching performance reported by undergraduate and graduate nursing students, demonstrated that faculty performance strengths included patterns such as being " knowledgeable and strategic teaching, creating a positive learning environment" which demonstrating professionalism, displaying scholarly traits and being supportive (22). In the line of this study by Mandirav (2014) who evaluate the community health nursing course of first year and revealed that content is almost covered and appropriate as reported by nearly one third of them, However, the most of them (83.3%) evaluated synthesis as "very good".

The weakness points of the current study were reported from the evaluation of students to clinical maternity course among both faculties but with higher percentages in Al-fayoum faculty as lack of lab rooms areas for clinical training, reliance on instructors from ancillary staff from other departments, lack of updating clinical evaluation methods, absence of objective criteria for practical tests, insufficient equipment and high training burden on clinical instructors with higher significant statistical difference respectively. In addition, regarding weakness of theoretical course also revealed significant statistical difference between both groups as curriculum is not revised regularly, lack capacity of classrooms and library to students this due to shortage in capabilities and budget.

Thus, infrastructures of the Al-fayoum faculty lack of experience, insufficient number and capabilities of staff member, and disproportionate number of students to the number of staff members.

Our current results were consistent with Zane et al. Findings who showed the weaknesses that reported by undergraduate and graduate nursing students included patterns such as poor delivery of content, acting disorganized, being inaccessible, displaying weak teaching skills, being dishonorable, being unprofessional, and displaying negative traits (22). In addition to implications for continuous quality improvement in teaching/learning processes. Moreover, our results in accordance with study by Mandira, (2014) who reported the most weakness point of studying community health nursing course as minimum time for practice was (29.5%), while deforestation was (39.3%).

However, lack of supervision due to shortage of faculty members was (24.5%). Also, lack of updating revision for curriculum was (31.1%), while lack of suitable areas for practical training was (27.8%) and lack of relevant teaching methods. More matching findings reported by study of Anees et al. which found that the problems faced by students during maternity clinical course results showed that difficulties of acquiring the skills and High clinical

training requirements ranked the main problems as nearly one-third of them (11). Strongly matched with a study of Esawi, in which (83%) of Egyptian male student nurses during attending the same course were reported a major problem with during their clinical training in addition to non-supportive attitude of their clinical instructors which is consider the second problem reported by (53.6%) (10). The third problem was in the afternoon shift for clinical training especially in labor and delivery which reported by (50.2%), while the difficulty of acquiring the skills of maternity nursing was reported by (10%) of students as the fourth problem.

The findings of current study presented students' opinion upon the important opportunities among two faculties and revealed an interesting different point of views. Two thirds of student in Assiut faculty reported that continuous follow-up of the educational process through quality project of the faculty was for improvement which reflected a statistical significant while Al-fayoum findings reflected that more than two thirds of students reported that they are trying to work on electronic curricula and encourage student to electronic learning considered as an important opportunity with a statistical significant difference.

Similarly, El-Nemer who studied Egyptian Students' Experience of E-Maternity course and indicated that E-learning courses reflected upon the experience of students; it presents positive feedback and challenges that the students meet through; it weighted toward future enhancement and also suggests that e-learning helps learners to engage in learning process and improve understanding and acquisition of learning skills (23). Also, these results are consistent with other researches, for example Saudi Arabian study by Hamdan who found that online education gives students greater control over the learning process, including the ability to post their feedback and assignments online and to discuss points that interested them in the readings (24).

As regard to threads of studying maternity course among studied groups the findings of the current study showed that three fourths of students in Al-fayoum reported that the faculty rules & policies needs to deal with the problems of students and the majority of them facing obstacles regarding policies of hospitals' directors for students training especially male students with a statistical significant difference. Whenever there were some of threads reported by the students in both faculties with nearly comparable percentage that doesn't reveals statistical difference as lack of employment scope for male students, Unequal training opportunities male vs. female students and absence of training & job opportunities for males' students.

Similarly, a study conducted by Keogh and Olynn, who reported that cold and unfriendly attitude of midwives towards students made the placement uncomfortable for the male participants and they were not allowed to in a full range of caring interventions during obstetric placements (25).

LIMITATION

The total number of students couldn't fill the questionnaire due to their lectures or other educational duties.

CONCLUSION

- Current study concludes that investigation and evaluation for the quality of maternity course based on students' viewpoints is worthy for both quality improvement in preparing maternity course and educational experiences student's involvements in the theoretical & clinical performance presents a wider viewpoint in expanding effective education in maternity nursing.
- Based on the result of the study, the study was able to identify the gaps regarding achieving objectives of maternity course in both faculties. In addition to reflection of differences between strengths, weaknesses, opportunities and threats among students from both faculties.

RECOMMENDATIONS

- Utilization of positive point including (strengths and opportunities) and dealing with the negative points (weakness & threats) could be effective step in promoting the quality of the maternity education.
- Curriculums should be revised regularly according to receivers (Student) point of views as it considers a mirror that reflects the actual situation of learning and educational processes.
- Maternity course should be update thoroughly by add new issues and trends into the course contents

- Develop a strategic developmental plan to achieve the vision of course, faculty and so on university
- Further researches are needed to apply SWOT analysis as a national program in all education institution.

REFERENCES

1. Azizeh FK, Mahnaz SH, khadijeh H, et al. Strengths and Weaknesses of Clinical Education Settings from the Viewpoint of Midwifery Students and Educators of Tabriz University of Medical Science, Article. 2013;2:7-14.
2. Mohammadi A, Mohammadi J. 'Educational service quality in Zanjan university of medical sciences from students' point of view. World J Educ. 2014;4.
3. Hill CWL, Jones. Strategic Management 6th Edn, Houghton Mifflin Co, Boston MA. 2004.
4. Dixit H, Marahatta SB. Medical Education and Training in Nepal: SWOT analysis Kathmandu University. Med J. 2008;6:412-20.
5. Shehnaz SI, Sreedhar J. Students perception of educational environment transition in United Arab Emirates. Med Teach. 2011;33:e37-e42.
6. Hamid B, Farouk A, Mohammad HB. 'Nursing student's perception of their educational environment based on DREEM model in an Iranian university Malys J Med Sci. 2013;20:56-63.
7. World Health Organization (WHO): Global standards for the initial education of professional nurses and midwives, Geneva. 2009.
8. Helal R, El-Masry R, El-Gilany A. Quality of educational environment among Egyptian medical students using DREEM questionnaire. World J Medical Education and Res. 2013;3:6-14.
9. Clynes MP, Raftery SE. Feedback. An essential element of student learning in clinical practice. Nurse Education in Practice. 2008;18:405-11.
10. Essawi A, El Sayed Y. The experience of Egyptian male student nurses during attending maternity nursing clinical course. 2011;11:93-8.
11. Anees A, Basel Z, Omar S, et al. The Experience of Nursing Male Students During Attending Maternity Nursing Clinical Course An-Najah National University Faculty of Medicine and Health Sciences Nursing and Midwifery Department Master thesis. 2013.
12. Papastavrou E, Lambrinou E, Tsangari H, et al. Student nurses experience of learning in the clinical environment. Nurs Edu Pract. 2010;10:176-82.
13. Lambert V, Glecken M. Clinical education facilitators. A literature review iss ues in clinical nursing. Nurs Educ Clin Pract. 2005;14:644-73.
14. Maben J, Latter S, Macleod CJ. Theory-practice gap, Impact of professional-bureaucratic work conflict on newly qualified nurses. J Adv Nurs. 2006;55:465-77.
15. Chuan, Barnett. Student tutor and staff perceptions of the clinical learning environment: Nurs Educ Pract. 2012;12:192-7.
16. Ildarabadi Es, Karimi M, Hossein, et al. The Nursing Students Perception of the Community Health Nursing Training. Life Science J. 2013;10.
17. Girija KM, Raghda K, Shukri JH, et al. Undergraduate Nursing Students' Perception of Effective Clinical Instructor Oman International J Nursing Sci. 2013;3:38-44.
18. Warne T, Johansson U, Papastavrou E, et al. An exploration of the clinical learning experience of nursing students in nine European countries, Nurse Educ Today. 2010;3:809-15.
19. Frankel A. Nurses learning style promoting better integration of theory into practice. Nurs Times. 2009;105:24-7.
20. Papp L, Markkanen M, von Bonsdorff M. Clinical environment as a learning environment. Student nurses perceptions concerning clinical learning experiences. Nurse Educ Today. 2003;23:262-8.
21. Edwards H, Smith S, Courtney M, et al. Impact of clinical placement location on nursing students competency and preparedness for practice. Nurse Educ Today. 2004;24:248-55.
22. Zane RW, Pamela JB, Janice M, et al. Strengths and weaknesses of faculty teaching performance reported by undergraduate and graduate nursing students, a descriptive study. 2004;3:8-44.

Strengths, weaknesses, opportunities and threats (SWOT) analysis of maternity nursing course

23. El-Nemer A, Marzouk T. Egyptian Students' Experience of E-Maternity Courses. *J Nurs Educ Pract*. 2014. The International Review of Research in Open and Distance Learning. 2014;15:309-36.
24. Hamdan A. The Reciprocal and Correlative Relationship between Learning Culture and online Education: A Case from Saudi Arabia. 25. Keogh B, O'Lynn C. Male nurses' experiences of gender barriers: Irish and American perspectives. *Nurse Educ*. 2007;32:256-9.