The Importance of Mentoring in Nursing Academia

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Abstract

Mentoring in academia promotes the retention of students and future faculty. Presently, it is general knowledge that we have a shortage of nurses in our profession. However, we also have a shortage of experientially qualified educators and mentors. In general, the problem is there is a lack of mentors in healthcare as a whole that have the ability or willingness to mentor future generations of faculty. Mentors are needed to pass on knowledge and promote retention of students and faculty in academia. The example we present to the students in healthcare professions will also impact the retention of healthcare faculty as a whole. It is logical to think that if we retain our students in academia, we also retain future experientially qualified faculty in academia. How we mentor one another as a novice and seasoned faculty can impact what students see and learn as well from us. A literature review of 46 articles was completed and 19 of the articles were used as references in this article, along with a few more relevant references. The articles from the literature review showed evidence of positive mentoring experiences lead to the retention of students, future mentees, and mentors in nursing academia.

Keywords

Mentoring, Faculty, Academia, Benefits of Mentoring, Retention and Mentoring, Academic Coaching, Developing Nurses, Challenges of Mentoring, Qualifications of a Mentor, Characteristics of a Mentor, Mentoring in Nursing and Healthcare

1. Introduction to the Importance of Mentoring in Academia

Research provides evidence that mentoring in academia is a vital part of retention in the healthcare profession [1]. Many healthcare students and faculty in the
academic setting feel there is a lack of academic mentoring in the healthcare profession [2]. The lack of mentoring in turn, contributes to the shortage of nursing experience in the healthcare profession for many years [3]. Building a foundation for academic mentoring skills in the healthcare profession begins when faculty nurture and mentor students. How faculty role-model mentorship in both clinical and theoretical environments, teaches students how to will treat others when these students become mentors and are no longer the mentees [3].

The article aims to define what a mentor truly is and discuss the skills needed for appropriate academic mentoring. Additionally, mentoring strategies nurses can use to pay it forward to the future of healthcare will also be points of discussion. This article will also reiterate the importance of academic mentoring in the healthcare profession for students and faculty [3]. Success in initiating and promoting academic mentoring will preserve and improve the retention of nurses and nursing students.

1.1. Definition of a Mentor and Skills Needed for Mentoring in Academia

Research shows there are several descriptions and characteristics of a mentor. Some research suggests that a mentor is “a coach, advice giver, counselor, guide, role model, and an experienced facilitator” [4]. Mentors possess the characteristics of being genuine, caring, compassionate, trustworthy, and respectful [5]. Other descriptions of a mentor indicate a mentor is an excellent communicator, a team player, and a person who forms a special connection with the mentee overtime to promote the mentee’s future success [1]. According to Hodges [6], “mentees that foster mentoring relationships include being life-long learners and embracing a commitment to both the university and the students’ success.” Given all the descriptions of what a mentor is the authors of this article would like to address their definition of mentorship. The authors’ definition of mentorship would be that mentors are faculty or nurse supporters, counselors, confidantes, advocates, preceptors, and advisors that promote the application of survivorship and retention of nurses and nursing faculty in the healthcare profession. Mentoring relationships include being life-long learners and embracing a commitment to both the university and the students’ success.

1.2. Mentoring Goals and Skills

The goals of mentoring depend on the needs of the mentee and what the mentee is meant to learn. All mentee goals must include a path for professional development, clear, concise instruction regarding the way a job should be done correctly, and include more than one strategy to meet the goals with a mentee [7]. Mentor goals must be challenging. Mentors possess skills in understanding knowledge related to cultures, cultural diversity, and diversity of thought. Understanding the broad spectrum of diversity is important when teaching mentees. Mentors teach mentees (often students) how to interact with others, promote shared governance, and paths to success. Mentors promote protection, se-
curity, and understanding of their mentees [8].

Faculty Mentors are needed in nursing programs to support the transition of nurses into the academic setting. Merrill [9], attests that it is essential to create a climate to assist the novice nurse faculty member in transitioning from practice to academia. The mentoring climate has a dynamic effect on the profession as a whole. Research reflects there is a direct correlation between positive mentoring, and recruitment and retention of nursing faculty [10].

1.3. The Importance of Mentoring Healthcare Students in Academia

To facilitate mentoring, faculty should utilize positive role-modeling with students [11]. The aforementioned is true because an academic mentor begins building relationships that promote educational and emotional growth [12]. Just as children learn from parents, students learn from their teachers viewed in many instances as academic mentors. Faculty have to maintain the rigor level and uphold professional boundaries because students learn from what they see in action, not only from what they observe in the classroom. The mentoring environment for students should include security, protection, openness to diversity, and one that does not tolerate incivility [12]. Mentoring occurs in the classroom, clinical environments, laboratory environments and even public environments. Students’ mentoring environments should include security, protections, openness, diversity, and one that does not tolerate incivility.

1.4. Mentoring Students and Professionals in Academia

Students see and learn how to maneuver and function in their environment by the role modeling and observing assigned mentors, who also function in the role of an educator for the mentee (Figure 2). Students are taught therapeutic communication and treating others with respect and compassion. One article indicated that mentors support their mentees by being role models during hard times. For example, when a mentee sees how a mentor reacts and interacts with others through a variety of experiences mentors demonstrate what it is to be a mentor and should be transparent in behaviors demonstrated to mentees (students) (Figure 1) [13]. The value that academic mentoring has for their present and future professional endeavors is priceless. This is true because mentoring can retain students and nurses in our profession. Nurse educators must teach and demonstrate to students a desire to be successful [12]. Suppose students do not have positive experiences with academic mentoring, it is a possibility that negative experiences may contribute to the shortage of healthcare professionals in years to come.

2. The Attitude and Reflection of Mentoring

2.1. Mentoring and the Attitude

A poor attitude and lack of positive mentoring drive potential nurses not to en-
ter the nursing profession and leave the profession before the mentee begins professional nursing or shortly after licensure. Negative experiences can lead to poor self-esteem, increased anxiety, medication errors, and decreased attention span, which can lead to student burn-out. For example, one article indicated that emotional outcomes of poor mentoring can lead to depressive symptoms, anxiety, decreased ability to adapt, lead to low self-esteem, and a decreased sense of purpose [14]. However, if the mentee feels supported, research indicates that they tend to have a sense of purpose. In addition, mentees feel as though they belong, develop good working relationships that build confidence, and decrease anxiety as the mentee develops professionally [14].

2.2. Mentor Reflection and Faculty in Academia

Health care educators, faculty members, and clinical instructors need to remember how it was for them when they first entered the realm of academia because experiences shape every professional to a certain degree [15]. Below Figure 1 and Figure 2 are visuals of the concepts that influence the factors that indicate whether a student or new faulty remember will have a negative or positive experience with mentoring (Figure 2). Note, the conceptual visual listed begins with the instructor, and the seasoned faculty member that influences either negative or positive outcomes. Many educators work through multiple trials and strategies to present information before they become proficient in the craft of education or academia [15]. Just as in healthcare, there is a novice nurse, an advanced

![Figure 1. Mentoring attitudes and retention. Faculty to faculty relationship](image1)

![Figure 2. Instructor to student relationship.](image2)
beginner nurse, a competent nurse, a proficient nurse, and an expert nurse, there are stages a mentee goes through before they can be a quality mentor. For example, a mentee must start out as a novice, then become proficient, then become competent, then become an expert in mentoring to give a mentee the best chances they can be to reach success in academia or in professional practice [16].

2.3. Mentoring and Resilience

The depth of resilience for a new faculty member is in working through the stages that have to do with how supported he or she feels. If strong, healthy bonds and relationships are built while students or novice nurses are in the learning process, it is beneficial to all individuals involved and these mentees will likely be the sought after mentors of tomorrow [17]. Mentor characteristics consist of role modeling, nurturing, and creating friendship, paying it forward by sharing their experiences, efficiently meeting on a regular basis, and showing the mentee the endurance it takes to make it in the field of nursing and in nursing academia [18]. With quality mentorship in place, the shortage of professionals in healthcare may likely decrease.

2.4. Foundation of Academia and Nursing

Most nurses arrive at the academic setting without a solid foundation for academia or classroom teaching skills. Therefore, it is important to be clear on the role of a mentor. The role of a mentor is to: provide guidance, support, foster networking, bring a positive attitude to the mentoring experience, gain rapport with the mentee, and connect with the mentee on a professional level to be able to identify with the needs of the mentee, and demonstrate and assist the mentee with the ability to obtain professional development [11]. These roles assist in the retention of nurses and nurse educators in the nursing profession. These nurses leave the security of being experts in the clinical arena, only to face the reality they are now novices in the field of nursing education. Transitioning can be challenging and a lack of proper mentoring in academia can lead to increase stress and anxiety as a nurse’s role changes from expert nurse in clinical to a novice nurse in academia [9]. To support and retain these new educators, mentoring is important. In 2008, the National League of Nursing (NLN) Board of Governors published a position statement [19], Mentoring of Nurse Faculty.

3. The Importance of Mentoring Students and Faculty

Faculty mentoring is just as important as student or new grad mentoring in one’s academic career, and mentoring needs will vary according to where the faculty member is in their career. According to Frederick [1], a lack of mentoring contributes to the nursing shortage as this can lead to novice nurses and seasoned nurses leaving the nursing profession. Research indicates that a lack of mentoring leads to feelings of decreased support in the nursing profession [1]. Nurses who feel they are not supported are likely to leave the profession contri-
buting to the nursing shortage that has been a problem for years [1]. The faculty member who is in the early years of his or her career may require a different level of support than the faculty member who is later in his or her career. While mentoring in academia can take many forms, it is essential to recognize that mentoring involves a mutually respectful, ongoing, and evolving relationship between two professionals.

Mentoring and Job Satisfaction

Mentoring new nursing faculty in academia can lead to job satisfaction, improve nursing and student outcomes, and decrease burnout. Successful mentorship requires realistic goals and expectations additionally, the mentor should also refer the mentee to seek further advice and learning opportunities with various educational experts to strengthen the mentees’ knowledge and empower their growth and development in academia [6]. Mentorship is an obligation to the nursing profession and is understood as a “way to give back to the profession” and known as “pay-it-forward” to the profession [20]. Speaking with nursing colleagues in other university programs, mentorship is not a part of the new-hire process or department onboarding, nor is mentorship included in nursing curriculum. From personal communication with other nursing faculty, many voiced concerns about not receiving effective mentorship. Ineffective mentorship identified by nursing faculty included a common theme of, lack of time for mentoring or building a trusting relationship, and no formal mentorship process for mentoring faculty. Mentee’s felt that some mentors lacked passion, and mentors were more concerned about getting the completed checklist submitted to administration to show a job completed when in reality the new hires felt they were not fully prepared or mentored in the new faculty role to fulfill job description [Personal Communication, CH October 12, 2020].

4. Conclusion

When asking faculty to identify their positive elements of mentorship, a common theme was time, trusted relationships, mutual respect, scheduled meetings, mentor availability and support, offering constructive feedback and providing the tools to navigate the academic environment. As mentioned earlier, evidence supports the need for mentorship in the nursing discipline, more so today than at any other time in the history of academia. It is likely that in the future there will be more statistical research to prove the points made in this article about mentoring and how if there is to be a future of mentors we need to create good relationships with our students, mentees, and nursing faculty in academia that enter into our profession.

Conflicts of Interest

The authors declare no conflicts of interest regarding the publication of this paper.
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