



# Understanding Effective Mentoring in Nursing Education: The Relational-Reliant Concept



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**Submission:** July 03, 2017; **Published:** July 13, 2017

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## Abstract

Mentoring is increasingly seen as a means of supporting holistic development amongst nursing students and newly qualified nurses. There is however significant variance within mentoring practice and a lack of consensus in the understanding of mentoring in nursing. This opinion piece seeks to highlight the importance of integrating mentoring into the prevailing undergraduate and postgraduate curriculum by exploring definitions of mentoring and specific roles of the mentor in contexts specific to nursing education.

**Keywords:** Mentoring; Mentoring relationships; Nursing students

## Introduction

In a profession as complex as nursing which involves the coordination and delivery of physical, emotional and existential care in various settings, it is paramount that practitioners in this day and age adopt evidence based practice and champion professional development. Traditional means of educating and supporting clinical, research, academic and personal growth amongst the nursing individuals is increasingly found wanting. Recent evidence supports the use of mentoring as a means of addressing prevailing gaps in individual nurse support. The downstream benefits of successful mentoring relationships are appreciated in the form of increased job satisfaction, improved teaching skills, promotion of collegiality and team building and improved academic and clinical performances.

However, as a prerequisite to employing mentoring in training programs it is paramount that the nursing community overcome the lack of a clear understanding of mentoring that has since hindered its advancement and blunting its potential in the role of nursing education [1,2].

There are several definitions of mentoring in literature thus bringing to light the lack of a universal understanding of the process specifically in the nursing education track. Alleman's definition is most commonly employed which sees the process as "a relationship between two people in which one person with greater rank, experience, and/or expertise teaches, counsels,

guides, and helps others to develop both professionally and personally" [3,4]. Another alternative definition to consider mentioned in Ketola et al. [2] adaptation of Hamilton's description which sees mentoring as an accomplished, more experienced professional who extends to a young, aspiring person, within the context of a one-to-one relationship, advise, teaching, sponsorship, guidance and assistance toward her establishment in her chosen profession. Despite the apparent robustness of these definitions spelt out, they are deficient in terms of context specificity. How does it translate to nursing education?

Differentiating between the nature of the dyadic group involved in the mentoring process is important as we recognize the heterogeneity of needs that exist. For example, there are indeed differences between mentoring within groups of peers, patients, families, youths and leaders to one that is most familiar to nursing education- the senior to novice mentoring relationship. Therein lies the need to define the process in a most context specific and relevant way for nursing education. Furthermore, the challenge of understanding what mentoring truly entails is further compounded by other processes such as 'preceptorship', 'supervision' and 'advising' which are often conflated with the mentoring and frequently used in nursing education. Instead of using these terms interchangeably with mentoring, they should in fact be distanced from true mentoring

in view of their lack of a holistic connotation. It is about time that nursing education moves towards a direction of embracing the practice of mentoring in its 'purest form' and those steps can be taken only if we attempt to understand what exactly constitutes the process.

### The Process

First we begin with the roles the mentor should play in this process. A successful mentor has the ability to meet the many roles expected of them during the course of the relationship, summarized in Table 1.

**Table 1:** Primary roles of mentors in nursing education.

<b>Transmission of Knowledge and Skills</b>	A key role of a mentor is the provision of clinical and professional support, facilitating learning opportunities, role modeling and providing career advice. These sometimes take the form of providing academic survival skills, facilitating efficient information retrieval, helping with writing skills and introductions to professional networks.
<b>Feedback and Evaluation</b>	Mentors provide key insights and feedback on various aspects of the mentee's development. Provision of feedback must be clear, constructive and confidential given its impact upon a mentee's self-confidence and their overall mentoring experience.
<b>Psychosocial Support</b>	Mentors offer support and encouragement particularly during stressful times.
<b>Role Modelling</b>	Role modeling allowed mentors to shape ideas, values, attitudes and professional identities, inculcate workplace ethos and organizational culture, instill confidence and empower nurses.
<b>Ethics</b>	Mentors are critical to equipping mentees with the skills and tools to address ethical dilemmas.
<b>Research and Academia</b>	Mentoring encourages scientific inquiry and thus plays a part in supporting mentees in each stage of the research and publication process.

Now that we have defined the roles of a mentor, the next step would be to understand the initiation of the mentoring process-seen as a formal or an informal event. A formal mentoring initiation involves a matching process that assigns mentees to mentor usually within the same working unit in a hospital, encompassing formalized aspects of agreements such as written consent. Ideally the match process should factor in the mentee's needs, academic goals, personality, knowledge and capabilities. With formalization comes along a program that is structured and focused on short term goals rather than the long term development of the mentee [5]. Informal mentoring on the contrary, hinges on the concept of spontaneity with mentees seeking out their preferred mentors and therefore may naturally result in a more career-centered and holistic dyadic relationship that transcends beyond the time constraints of clerkships. Regardless of how the process is initiated, the effectiveness of the process is ultimately influenced by dyadic relationship which should pivot upon the principles of good communication, connectedness, collegiality and reciprocal learning between the mentor, the mentee and host organizations.

Ultimately, mentees are able to identify desirable aspects of a good mentor. Apart from placing a premium on practical aspects of imparting relevant knowledge and skills in day to day nursing, mentees often lookout for softer attributes such as motivation, approachability, trustworthiness, respectfulness and willingness to share personal experiences while listening out effectively to their needs and concerns. [6]. The success of the relationship also hinges upon effective interactions in all parties highlighting not only the role of the mentor but also that of the mentee. It would be difficult to reap the benefits of mentoring without the innate motivation and self directed learning of mentees who possess positive attitudes and willingness to excel. Mentees must be willing to openly discuss their goals, capabilities, skill sets, knowledge and competence openly while taking advantage of suggestions or opportunities given by their mentors.

Taking it beyond the realm of the dyad, effective mentorship in nursing can only be achieved with supportive reciprocal co-operation between all stakeholders as workplace environments influence employee attitudes and behaviors far more than personal predispositions that have been discussed above [7]. Organizational support in the form of access to resources and opportunity increases mentor's job satisfaction and recruitment and retention [8]. However supportive the environment is within the organization, the entire process is not immune to significant systemic barriers such as time constraints due to tight schedules on both the mentor and mentee. Furthermore, the lack of dedicated funding to facilitate expansion of mentoring programs has led some to employ a 'blended' approach involving web based interactions supplementing face-to-face mentoring.

### The Relational-Reliant Aspect of Mentoring

Echoing evidence within healthcare and the business sector, the notion that mentoring is an effective means of nurturing development has been made almost undisputable. However, what we still lack to recognize is the fact that mentoring is process that goes beyond the 'cocoon' of the dyad. Jokelainen et al. [9] coined the term 'Seamless collaboration' to emphasize the entwined nature of mentee, mentor and organizational factors in supporting a mentoring relationship in a nurturing mentoring environment and hence giving rise to this term of the 'relational-reliant' nature of mentoring [9]. The quality of the mentoring process relies upon the dynamic interplay between the mentees, mentors and host organization in this somewhat enmeshed relationship.

This brings into spotlight the pivotal role of the host organization in providing a nurturing environment for mentoring to take place in. From the initial stages of the mentoring process, the host organization undertakes and supports a matching process where like-minded individuals with similar beliefs, values and interests are brought together with a common goal of advancing the interests of the mentee. As it progresses, a host environment that facilitates frank, open and honest exchange of

ideas allows mentors to respond appropriately to the contextual changes in the mentee while supporting the mentee's evolving needs. More tangible ways in which the host organization supports this process is by providing funding and resources that are needed for mentors to respond effectively to changing conditions.

The impact of these wider environmental factors in tandem with mentee, mentor and organizational dependent factors repudiate the traditional notion that mentoring is a dyadic relationship between mentor and mentee and even the idea that mentoring could be a triadic relationship between mentee, mentor and host organization. Mentoring environments do not develop in isolation, free from external influences. Hence in terms of future directions of research, it would seem that it would be pertinent to focus beyond what we already know about its effectiveness and to shift the focus to internal mechanisms of mentoring relationships as well as wider organizational and environmental factors to proffer fresh insights into the process. That being said, it brings to light the paucity of literature pertaining to the relational and dynamics aspects of mentoring currently.

### A New Definition?

Now it is possible to reconstruct the definition of mentorship in nursing education, making it relevant and context specific. It can be defined as "a dyadic, long-term and reciprocal process between senior experienced nurse and a junior nurse and or a nursing student, facilitating knowledge and skill acquisition while providing psychosocial and emotional support with the aims of fostering both personal and professional development for effective role change into the nursing profession". A definition that indeed, amalgamates all the pertinent domains related to the mentoring process in nursing education.

Perhaps with that, a deeper and common understanding of the meaning of mentoring in nursing can be achieved in the community, spearheading organizational support and shaping effective mentoring program models in the future of nursing education.

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