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MENTORING OF NURSE FACULTY

Board of Governors January 28, 2006

In order to recruit and retain qualified nurse educators, the National League for Nursing advocates the use of mentoring as a primary strategy to establish healthful work environments and facilitate the ongoing career development of nurse faculty. Mentoring is relevant across the entire career continuum of an educator, and encompasses orientation to the faculty role; socialization to the academic community; development of teaching, research, and service skills; and facilitation of the growth of future leaders in nursing and nursing education. Effective mentoring relationships reflect a variety of models, thereby enabling all members of the academic nursing community to establish and maintain healthful work environments, and expecting each to fulfill this role.

Shaping the Future of Nursing Education



BACKGROUND AND SIGNIFICANCE

Contemporary academic communities in nursing reflect an increasing number of new teachers, particularly those who are employed in adjunct, temporary, and part-time positions. In addition, the number of master's- and doctorally prepared faculty is difficult to maintain due to an increase in the number of retirements and the exodus of faculty to higher-paying positions. Finally, the small number of faculty who have had formal preparation for the nurse educator role, those who are the educational "architects," poses particularly significant problems. Those in faculty roles are expected to anticipate the increasing complexity of the health care system and to prepare graduates who can think, make decisions in uncertainty, take risks, facilitate change, and communicate effectively. These same faculty members are also expected to conduct research, advance the discipline, and provide service to the profession and their academic institutions. The multidimensional nature of the nurse educator role, with competing expectations related to teaching, scholarship, service, maintaining clinical competence and continued professional growth is difficult to balance, especially for new faculty members, many of whom were not prepared as nurse educators.

Experienced teachers, with practical knowledge of the faculty role, are an important resource for new teachers. However, given projected retirements and resignations of two-thirds of the current faculty over the next 20 years (NLN, 2002), this significant resource will be lost. How will the growing number of new teachers in nursing be assisted to develop and succeed in their role?

Mentoring is a popular concept that has been used in business, education, and other fields to socialize individuals to new roles. Traditionally, the mentoring relationship has involved a mentor and a protégé who engage in a long-term relationship where the mentor guides and advises the protégé, opens doors for her/him, teaches the protégé the ropes, and generally serves in a supportive role (Gibson, 2004). Research has documented that individuals who experience this kind of mentor-protégé relationship advance quickly in their careers, earn higher salaries at an earlier age, are more likely to follow a personal career plan, receive greater pleasure from their work, and eventually serve as mentors themselves (Roche, 1979). Thus, there are many benefits to this traditional type of mentor relationship. However, this is not the only type of relationship that can exist between a mentor and a mentee.

Contemporary perspectives have expanded the concept of mentoring into more collaborative models that use both peer and co-mentoring. Peer mentoring occurs when the new faculty members themselves pool their information and expertise and support each other. Co-mentoring is characterized by reciprocity and involves listening and being listened to, teaching as well as learning, and offering and obtaining information and support through recurrent dialogue. Both of these models — peer mentoring and co-mentoring — are characterized by shared support and caring, which are considered important for engendering community, preserving scholarship, and cultivating teaching practices. Both models emphasize the communal aspects of mentoring and the empowerment of the many, in contrast with the traditional conceptualization of mentoring, which carries hierarchical notions of power and may be limited to the few (Young, 1999).

Research has documented that new faculty often feel a lack of support and recognition by colleagues, but collaborating with receptive others helps them overcome their feelings of isolation (Boice, 2000; Menges & Associates, 1999; Rice, Sorcinelli & Austin, 2000). It is becoming increasingly clear that a personalized, supportive relationship has positive outcomes for both the mentor and the mentee throughout the career continuum (Boice, 2000; Stewart & Krueger, 1996; Grossman & Valiga, 2005) and that experienced, as well as new, faculty benefit from peer and co-mentoring. Specifically, the collaborative and community reflective dialogue associated with co-mentoring is an important way for new faculty mem-

bers to learn community norms as well as the skills, strategies, and practices of teaching (Young & Diekelmann, 2002).

Labeling faculty members as new can obscure the fact that they often bring teaching experiences, insights, and innovative pedagogical perspectives to their communities (Young, 1999). Peer mentoring gives recognition to the fact that even new faculty have valuable knowledge and experiences to share, and it encourages those new faculty members to participate in peer mentoring relationships where they can pool their information and expertise (Young, 1999).

While collaborative mentoring models may have more relevance for today's academic setting, the traditional model of mentoring also is viable and should not be discarded. What is essential throughout the nurse educator's career continuum, however, is interaction with individuals who can continually support, guide, teach, and challenge them.

In fact, the NLN's Hallmarks of Excellence in Nursing Education[®] includes a focus on mentoring by asking faculty to examine whether there is a mentoring program in place to assist faculty as they progress in their careers. Such a question is suggested as one indicator of the following Hallmark: "All faculty have structured preparation for the faculty role, as well as competence in their area(s) of teaching responsibility" (NLN, 2005). Thus, mentoring relationships are not merely a fad, but they are important indicators of excellence in nursing education and should be nurtured and supported.

MENTORING THROUGHOUT THE CAREER CONTINUUM

Early Career Faculty Members

For the faculty member who is new to both the educator role and the institution, mentoring should be a significant component of an organized system of orientation. Formal orientation programs often include an introduction to key personnel and resources, a review of the courses and curricula being taught, an overview of job benefits and administrative and governance structures, and an introduction to the culture and political environment of the institution. An important addition, however, is the assignment of a mentor (i.e., a seasoned faculty member) who, throughout the entire first year, answers questions, interprets situations, and provides direct help to the mentee (i.e., the new faculty member) (Morin & Ashton, 2004). The mentor provides information about the knowledge, skills, behaviors, and values that comprise the faculty role.

Ideally, the individual assigned to mentor a new faculty member should have a similar schedule to ensure optimum availability, and she/he should be someone who is perceived as being friendly and caring. Since the assigned mentor can only provide information from her/his personal perspective, this mentormentee relationship should be thought of as only one part of a welcoming community. Indeed, the entire faculty shares responsibility for establishing a healthful environment in which novice faculty develop a sense of belonging, which is important for the retention of faculty members (Young, 1999).

Mid-Career Faculty Members

Unlike an initial orientation to the faculty role, mid-career mentoring is eclectic, varied in its content and process, and directed more by the faculty member (i.e., mentee) than by the mentor. Mentoring of mid-career faculty embraces the notion that mentoring programs should encompass both formal and informal approaches to promote "mutual sharing, learning, and growth" (Vance & Olson, 1998, p.5).

While early career mentoring is designed to help the uninitiated learn the complexities of the faculty role, mid-career mentoring is individually focused and takes time to evolve. It is at this point in their development that faculty establish both formal and informal mentoring relationships with seasoned faculty and others who share their interests inside and outside their academic community. Mid-career faculty require support as they identify and test innovative pedagogies, propose new solutions to problems, and evolve as educator/scholars in local, regional, and national arenas. They may actively seek mentors from within and outside their institution who can help them develop specific aspects of the faculty role – teaching, evaluation of learning, curriculum design, scholarship, service, and leadership. And they may engage in multiple mentoring partnerships, where each mentor assists them to grow in a particular area, such as grant-writing or conducting research on a particular topic. Mid-career faculty members also may select mentors who can provide guidance in selecting and transitioning into academic leadership positions.

Late Career Faculty Members

While late career faculty members often assume the role of mentor as a seasoned educator, they also benefit from a mentoring relationship as they enter new roles in the academic setting. The academic community looks to its seasoned faculty to identify new faculty members who show potential as leaders in nursing and nursing education and enter into mentor-protégé relationships with them, relationships that extend over long periods of time. In this role, the seasoned faculty member cultivates a relationship that is situated in common interests and is built upon mutual respect for one another's knowledge and talents. This relationship is characterized by the investment of time, effort, and caring; the identification of mutual goals; and regular, ongoing dialogue designed to ensure the accomplishment of those goals.

In the mentor-protégé relationship, the mentor shares her/his wisdom, knowledge, and expertise; builds connections in multiple communities by introducing personal networks; and keeps open a future of possibilities for someone who is expected to make significant contributions to the profession. Through an extended relationship, the mentor nurtures leadership in the protégé. The relationship is reciprocal and sustained as the mentor derives satisfaction from guiding another in attaining self-clarity, grows personally, and continues to develop her/his skills. The mentoring phenomenon is sustained as the protégé, in turn, mentors others who show promise in moving the profession forward (Grossman & Valiga, 2005; Stewart & Krueger, 1996).

CONCLUSIONS

At a time when academia is experiencing a serious shortage of nurse faculty members, it is imperative that steps be taken to recruit and retain qualified educators. One important primary step is the use of mentoring across the career continuum.

Successful mentoring requires learning how to be a mentor or mentee, an ongoing commitment to the mentoring process, and additional research to identify the benefits and barriers of mentoring. Educating faculty about the concept of mentoring can be accomplished through professional development workshops and seminars. Concepts related to mentoring should be added to graduate and undergraduate curricula and provided through faculty development programs.

An ongoing commitment to the practice of mentoring requires support from administrators and the entire nursing faculty. Establishing a healthful work environment where collaborative peer and co-mentoring are an expectation, rather than a possibility, is the responsibility of all involved in nursing education. As mentoring across the career continuum is implemented, research is needed in order to extend the evidence base for this practice.

RECOMMENDATIONS

For Nurse Faculty

- Contribute to the development of a mentoring program at your institution by identifying the needs of new faculty members and the resources required to meet those needs.
- Actively participate in mentoring relationships.
- Make the teaching done by experienced faculty members more visible to new faculty.
- Be open and friendly to new faculty and identify opportunities to be a "One Minute Mentor" through brief, supportive interactions (Oermann, 2001).
- Become sensitive to existing and potential academic community practices that exclude new faculty members.
- Spend time together as a nurse faculty community, talking and listening to one another, including the new faculty.
- Attend professional development workshops and seminars on mentoring.
- Collaborate with the dean/director/chairperson to establish a mentoring program.
- Include content on mentoring in undergraduate and graduate curricula including how to identify and select caring colleagues with whom to work closely, and how to collaborate with colleagues.

For Deans/Directors/Chairpersons

- Initiate and provide support for mentoring initiatives at your institution.
- Engage new, mid-career, and seasoned faculty in developing mentoring initiatives at your institution.
- Incorporate innovative strategies for mentoring new faculty members, such as the use of retired nurse educators (Bellack, 2004).
- Value the mentor role and reward faculty who actively serve in a mentoring role.
- Support the development of faculty mentors.
- Model mentoring.

For the National League for Nursing

- Support research on mentoring in the academic environment.
- · Offer workshops and seminars on mentoring.
- Develop a "Tool Kit" on mentoring.

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