Mentoring Young Minds: Focusing On the Educators’ Role in Mentoring Students at Institutes of Nursing Education.

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Abstract: Nursing as a profession is taught in a teaching Institute by nurse teachers/ educators. Nurse educators combine clinical expertise and a passion for teaching into rich and rewarding careers. These professionals, who work in the classroom and the practice setting, are responsible for preparing and mentoring current and future generations of nurses. Nurse educators play an important role in strengthening the nursing education, and serving as role models and providing the leadership needed to implement evidence-based practice. Nurse educators are responsible for designing, implementing, evaluating and revising academic and continuing education programs for student nurses. Nurse educators are critical players in assuring quality educational experiences that prepare the nursing workforce for a diverse, ever-changing health care environment. They are the leaders who document the outcomes of educational programs and guide students through the learning process. This paper focuses on the need, types, functions, characteristics, roles, advantages and disadvantages of mentoring that is to done by the nurse educators.

Key words: definition, types, functions, elements, factors, models, challenges, advantage, disadvantage and roles and responsibilities of nurse educators involved in mentoring process.

I. Introduction

Changing Youth - Changing need

It is clear that young people are growing up in a very different world than our generation. The effects of globalization in combination with general social demographic and economic trends have had a powerful impact on the experience of being young. Public perception about young people becoming contradictory: Moral panics’ about youth are not new but these have reached new levels of intensity as any glance at a tabloid newspaper will suggest. It is mandatory need for each Institute Of Nursing Education to provide an environment that promotes holistic self development and professional nursing education to the future professionals in nursing.

II. Concept Of Mentoring

What is mentoring?

A mentor is an individual with expertise who can help to develop the career of a mentee. The mentor guides, trains, advises, and promotes the career development of the mentee.

“The task of leadership is not to put greatness into people, but to elicit it, for the greatness is there already.” (John Buchan)  

“A good leader inspires people to have confidence in the leader. A great leader inspires people to have confidence in themselves.” (Eleanor Roosevelt) 

Defining mentoring is difficult, and it is further compounded by the use of interchanging terms such as coach, preceptor, and teacher (Butterworth, Faugier, & Burnard, 1998; Milton, 2004). The CNA (2004) states, “Mentoring involves a voluntary, mutually beneficial and usually long-term professional relationship. In addition, mentoring can be viewed as an informal or formal process. Informal mentoring is characterized by a shared agreement between the mentor and the mentee to establish a relationship in an unstructured manner, and is based on the realization of career goals for the mentee. Formal mentoring, however, involves structure, both in terms of defining purposes and in the longevity of the relationship (Tourigny & Pulich, 2005). There are subtle differences between the interactions of training, coaching, teaching, and mentoring which can produce drastically different outcomes (Ryanbhale).

Training – to help a student to master a specific skill in a direct (or “hands on”) interaction, use Training. To give an example you want to teach your student to learn to make her patient’s bed. The Training style involves getting the articles and working next to her at the patient’s bedside to make the bed together. After a few attempts, she will do more and more of the task herself until she is independently proficient.
Coaching – for a specific skill, but now in an indirect (or “hands off”) interaction, use Coaching. For this example, this means talking to your student before (and/or after) bed making for a conversation. Ask questions to reinforce knowledge and help her anticipate setbacks before they occur. Give tips and tricks that have helped you succeed at the same task. Great coaches also help to boost confidence and reduce anxiety to improve performance.

Teaching – increase capability in a general suite of skills through direct interactions with Teaching. You can help your student master a number of beds from, post operative to orthopedic beds over a series of lessons in the hospital. Teachers help build skills in a number of tasks, plus help to generalize the approach they teach to enable success in related (but not identical) situations.

Mentoring – the most abstract development method, mentoring builds capability in general skills through indirect interactions. Mentoring your student in this analogy would include conversations to explore why independence and proficiency in bed making is important, what she enjoys most and least about what she’s learning, etc. Great mentors fill in blind spots, clarify motivations, and remove mental obstacles to success over longer-term interactions.

III. Mentoring Functions, Qualities & Elements

Functions of a Mentor
• Educational/ Professional
• Psychosocial

Education functions: Help the mentee to learn and prepare for education/ professional advancement. The activities performed by mentor for this are:
• Coaching
• Initiating interest by giving challenging projects/assignments
• Exposure and visibility
• Protection

Psychosocial functions: Help the mentee to develop a sense of competence and individuality and identity. The activities performed by mentor for this are:
• Role-Modeling
• Acceptance and confirmation
• Counseling
• Guidance
• Supervision

Who can be a mentor?
• All nursing teachers/guides who are acceptable to the students who can help ease transition with the mix of support and challenge.
• A mentor identifies hidden potential, as well as problem faced by the student and works to draw out the best in the student.
• Mentoring is not a static relationship, but it is a set of dynamic and fluid process of negotiation.

Elements of good mentoring
• Trust
• Confidentiality
• Reciprocity - a situation in which two people provide help or advantage to each other.
• Mutual respect
• Support
• Challenge
IV. Factors Affecting Mentoring

Factors affecting mentoring:
1. Authoritarian approach
2. Lack of respect
3. Taking control from the student
4. Intrusiveness
5. Forcing the pace

It is important to remember that there are responsibilities with adult student relationship. Students look up to mentors as their role model; hence they closely watch the adults’ action and see whether their behavior is appropriate. Mentoring in nursing is a process of making sense of a chaotic world where new strategies of coping are required.

This Support / challenge model is given by chipscholz7.

Challenges in application of mentoring in a nursing college
1. The students come with lack of knowledge and understanding and aptitude for the profession that is undertaken by them.
2. They lack appropriate value system to meet the demands that the profession places on them i.e., truthfulness, honesty, punctuality, respect for others, perseverance, compassion, conscientiousness, caring, quality, commitment and discipline etc.
3. Subject to peer pressure: mentee may be diverted from the aims of professional education and behavior for the need to be connected to social networks (chatting, phone), way of dressing, use of slangs, way of communicating, way of behaving.
4. Lacking appropriate abilities to handle the subject matter in all aspects i.e., poor cognitive and psycho motor abilities.
5. Low or middle socio economic background. Problem with paying fees on time for education and hostel.
6. The context changing world, changing youth, changing need in society

Advice to Potential Nurse Teacher Mentors:
- Recognize that mentee may be uncomfortable asking for help – break ice by sharing some of your educational experiences
- Stay in your zone of expertise/experience
- Be clear that mentee sets pace of relationship
- Advice, mould and respect but do not pressurize.
- Extend mentee’s developmental network – suggest additional help if needed.
Stages of Mentoring
- Initiation Stage
- Cultivation Stage
- Separation Stage
- Redefinition Stage

Advantages of Mentoring
- Advantages for the mentee:
  - Educational/Professional advancement
  - Good placement
  - Organizational/Professional identification
- Advantages for the mentor:
  - Career enhancement
  - “Passing the torch to a new generation”
  - Learning from mentee – new technologies, new developments, important features of next generation

Disadvantages of Mentoring:
- Disadvantages for the mentee:
  - Overdependence on the mentor
  - Micro-management from the mentor
  - Negative halo from mentor who fails
- Disadvantages for the mentor:
  - Mentee dependence on mentor
  - Time, energy commitment to mentee
  - Negative halo from mentee who fails

V. Role Of Mentees, Principal, Affiliating Agency And Management In Mentoring

Role of Mentees:
- Seek counsel and advice, not a supervisor who directs actions.
- Be aware of potential pitfalls: overbearing mentor, mentor exploitation of mentee’s work and sexual harassments.
- Be sensitive to the difference between asking for help/advice from your mentor and demanding favors from your mentor. Maintain professional boundary.
- Synthesize lessons learned from all mentors – become your own person.
- Recognize dynamics of relationship and keep away and seek timely help from deviant relationships.

The role of a Dean / Principal
Bringing together an environment of healthy mentor and mentee relationship for which first train the mentors by:
1. Choosing the right type of mentors
2. Placement of the mentors in right program.
3. Training of the mentor/mentoring the mentor on ethics, organizational
4. Motto/philosophy on expected professional roles and responsibilities.
5. Maintaining teachers student ratio of 1:10
6. Regular student and teachers’ feedback.
7. Monthly student meet with one advisor selected by the students.
8. Monthly staff meeting.
9. Monthly in-service education meeting to discuss changes in nursing.
10. Monthly HOD meetings.

The Dean / Principal should ensure that students are supported to handle the stress of education. He / She has to be aware and take preventive actions to see that there are no personal self destructive tendencies are in the students like getting into unhealthy relationships and habits to cope with the challenges that life, education, and clinical learning poses.
Solutions:
- Regular parent teachers meeting, parents are timely informed about students’ progress and encouraged to meet with Faculty and Principal / Dean.
- Induction and orientation of new nurse teachers
- It should include a 2 days training program on worth ethics, policies of institute etc…
- By policy teachers are not allowed to go out with students alone after work hours
- Teachers should not be allowed to entertain students at home.

Quality education at the Institution of Nursing Education means that:
1. Students feel safe and secure- no ragging, no humiliation, and no exposure to sexual harassment or exploitation.
2. Students maintain clear and goal oriented perspective in life.

This is to be done by:
- Ensuring adequate physical infrastructure at the Institute to learn the skills of the profession
- Ensuring adequate number and right type of mentors to provide professional education. Maintaining ratio 1:10 students. Hiring and retaining quality mentors
- Mentoring of mentors on ethics, on teaching methodologies, on attitude, on skills
- Ensuring open communication between students faculty and administration
- Ensuring appropriate and timely feed backs and evaluations to improve the system by
  o Daily time for interaction with Dean / Principal
  o A suggestion box being placed in each floor of the institute.
  o The suggestions should be analyzed weekly.
  o Yearly course evaluation by faculty and students
- Ongoing course evaluation by each student
- HOD, Peer and Self evaluation of teachers
- Having regular working committees like Discipline Committee, Anti – ragging and Vishaka Committee at Institute

Management / affiliating body’s responsibility as a mentor:
The management should ensure all round quality education which involves holistic development of the student in curricular, extra-curricular and personality development. There should be a Local Management Committee at each Institute with frequent meetings for smooth functioning of the institute.

VI. Conclusion
As Puetz (1985) suggests, mentors seem to have several specific functions, including serving as teachers, sponsors, hosts, exemplars and counselors. Mentors share their experiences, thus teaching the best way of doing things, enhancing their protégés’ skills and furthering their intellectual development. Mentorship could thus be seen as a master craftsman/apprentice relationship, which the trained, skilled practitioner enables the learner to develop skills, knowledge and attitudes, which Morris (1988) described as ‘professional nurturing’.

Summary
This paper concentrated on why, how, where and what of mentoring for nursing students. To have quality education in nursing we need quality mentors.

Reference