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Mentoring Experiences of Male Nursing Faculty

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There is currently a shortage of nurses in the United States. This problem is further compounded due to a lack of faculty in nursing schools because of competing opportunities within the profession. According to the American Association of Colleges of Nursing (AACN) *2015-2016 Enrollment and Graduation Report*, approximately 47,000 applicants were turned away from nursing programs in 2015 due primarily to lack of clinical sites and qualified faculty (Fang, Li, Staufer & Trautman, 2016). The Institute of Medicine (IOM, 2011) urged the nursing profession to recruit diverse individuals to provide culturally appropriate care. Males are one group that must be further recruited to help provide for a diverse workforce reflective of society. According to the AACN (2016) males comprised 7% of the nursing faculty workforce. The AACN (2016) asserted that a lack of diverse faculty may discourage students from entering the profession limiting the pool of diverse nurses to socialize into the faculty role. The lack of men in the nursing faculty role may affect the choice of males to enter the profession. Mentoring is one way to help recruit and retain male nursing faculty. While mentoring has been demonstrated to be a great support to those transitioning to the academic role (Schrodt, Cawyer, & Sanders, 2003), men may also have different mentoring experiences because socialization is such an inherent component of mentoring. Just as a lack of diverse faculty may negatively impact faculty socialization, it is also reasonable to expect that professional socialization experiences of current male nursing faculty may differ from those of female faculty. Berent and Anderko (2011) proposed that faculty enter and remain in academia because of the professional satisfaction of being able to mentor others and the opportunity to shape future nurses. From an education standpoint, if male nursing faculty can be role models and mentor students, then it may attract additional men into the profession, thereby further diversifying the workforce. Evans (2013) found that males who were encouraged by male faculty were more likely to enter academia. Although there are separate bodies of literature about the mentoring experiences of male nurses and male faculty, little is known about the mentoring experiences of male faculty in nursing education. An increased understanding of these experiences is essential to recruit and retain male nursing faculty in numbers which more closely reflect the demographics of society. Therefore, a qualitative descriptive study was done to examine the mentoring experiences of male nurses in academia. The study was guided by the global mentoring process model by Baxley, Ibitayo, and Bond (2012) whereby the authors reflected on personal experiences and reworked Zey's (1991) Mutual Benefits model. Baxley et al. (2012) explained that within the global mentoring process model the mentor and protégé benefit in the form of advancement, expertise, loyalty, and role-modeling. This is in addition to the benefits identified by Zey (1991) of knowledge, personal support, prestige and protection. Furthermore, according to the global mentoring process model mentoring occurs in an environment where there

is trust, communication, respect and cultural influences. The research questions were as follows:

1. What are the experiences with formal or informal mentoring related to career development of male nurses in academia who are teaching or who have previously been in a teaching role?
2. What are the experiences with formal or informal mentoring related to psychosocial development of male nurses in academia who are teaching or who have previously been in a teaching role?
3. What are the facilitators to formal or informal mentoring experiences among male nurses in academia?
4. What are the barriers to formal or informal mentoring experiences among male nurses in academia?
5. How, if at all, does gender affect the mentoring experiences of male nurses in academia?

Male nurses in academia were invited to participate in semi-structured interviews if they had formal or informal mentoring experiences, were currently teaching or had experience teaching, and were employed full or part-time as defined by their institutions. The sample size was 10 participants and based upon data saturation. The majority (n=9) of the participants had a PhD or DNP degree and were employed full-time. Two of the participants were 31-40 years of age, three were 41-50, two were 51-60, one was 61-70, and two were over 70 years old. The participants had six to 20 years of experience in academia.

The data analysis was carried out using the constant comparative method described by Glaser and Strauss (1967). The researcher developed codes and continued to review any newly developed codes to those previously identified. Five themes emerged from the data. In the theme of *early supporters* many of the participants identified having individuals who, either formally or informally, provided early support for their career decisions. Some of these early supporters included family members, male or female nurses, and male or female instructors. Overall, the participants explained that although those individuals may not be considered formal or informal mentors, they were crucial in helping them develop early on and helped affirm their career decisions. The theme of *figuring it out* had to do with finding the necessary tools to be successful in the culture of academia. The participants explained that the transition to academia was different than working in a clinical setting; therefore, mentoring provided an opportunity to learn how to handle processes and issues unique to the institution. This included figuring out which committees to be involved in and how to progress in academia. Additionally, mentoring was a way to get answers to questions, seek out resources, and learn to handle student issues. Some participants explained that because of a lack of education related to pedagogy, mentoring assisted with figuring out the day-to-day aspects of academia.

The *making connections* theme was related to how the mentoring experiences allowed the participants to foster relationships and socialize into the academic environment. Informal mentoring also provided connections to others in order to progress personally and professionally. The theme of *paying it forward* emerged as participants described their experiences with mentoring. Many of them consistently discussed their progression from protégé to mentor and how it was important to help other faculty members and

students. In the *role of gender* theme, most participants identified that the lack of males in the profession and their availability for mentoring was an issue. Because there were mixed responses related to the role of gender in mentoring experiences, the subtheme of *pros, cons, and neutrals* emerged. The subtheme of *need for understanding* was developed as participants expressed a need to be understood from a male perspective within the profession. Facilitators to the mentoring experiences included having a supportive person and connection with mentors. Barriers to the mentoring experiences were described as not enough time and lack of support from the individual and institution.

Based on the findings of this study, nurses must advocate for the profession by providing information to males and other underrepresented groups about the potential of nursing and academia as a career. Schools of nursing must develop mentoring programs based on the individual needs of the protégé with clearly delineated roles and responsibilities of the mentor and protégé. Additionally, nursing education administration must provide a supportive environment and monetary and non-monetary resources to support effective mentoring programs.

The real challenge for nursing education moving forward is to demonstrate a genuine commitment to mentoring. The National League for Nursing (NLN, 2006) recommendations on mentoring in nursing education were published over a decade ago and explained the value of mentoring to help orient and socialize faculty, assist faculty with teaching, research, and service, and provide growth for future nurse educators and leaders. Research to support those recommendations is now more widely available. The question then, is “Why have those in nursing education not committed to invest the time and resources necessary to mentor and support nursing faculty members? The findings from this study support investment in mentoring programs not just as a strategy to support recruitment and retention of males in academia, but to promote an environment inclusive of any underrepresented populations in nursing academia, which should help further diversify the nursing workforce long term.

Title:

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Keywords:

Mentoring, Nursing faculty and Underrepresented groups

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Abstract Summary:

More males must be recruited into the nursing profession and nursing education to achieve workforce diversity that is more reflective of societal demographics. Mentoring is one way to help recruit and retain male nursing faculty. A qualitative study to describe the mentoring experiences of male nursing faculty will be presented.

Content Outline:

1. Introduction
1. Background
 1. Insufficient number of faculty
 2. Lack of male faculty
 2. Definition of mentoring
 3. Purpose- Gain an understanding of mentoring related to career and psychosocial development as experienced by male nurses in academia
2. Body
 1. Significance
 1. Nursing Practice
 1. Shortage of nurses
 2. Diverse workforce
 2. Education- encouragement by male faculty
 3. Administration – balance work responsibilities and relationships
 2. Framework
 1. Global mentoring process model
 3. Methodology
 1. Qualitative descriptive
 2. Participant selection
 1. Purposive sampling, snowball, personal email

2. Sample n=10, 31-40 years = 2, 41-50 = 3, 51-60 = 2, 61-70 =1, over 70 years = 2.
MSN= 1, DNP = 3, PhD =6. Years in academia 6-10=4, 11-15 = 2, more than 20 years = 4.
3. Data collection and analysis
 1. Semi-structured interviews, audio recorded
 2. Interviews transcribed by researcher, constant comparative
4. Results
 1. Early Supporters
 1. Unexpected theme
 2. Not specifically related to mentoring but important to career related decisions.
 3. Individuals, who either formally or informally, provided support for their career decisions and/or development.
 4. Some of early supporters included family members, male or female nurses, and male or female instructors
 2. Figuring it out
 1. Known theme
 2. Used mentoring to look for ways to adapt to the academic role and culture.
 3. Transition to academia was different than working in a clinical setting; therefore, mentoring provided an opportunity to learn how to handle processes and issues within the institution.
 4. Mentoring was seen as a way to get answers to questions, seek out resources, and learn to handle student issues.
 5. Because of a lack of education related to pedagogy, mentoring assisted with figuring out the day to day aspects of academia.
 3. Making connections
 1. Known theme
 2. Mentoring fostered relationships and socialization
 3. Subtheme of vulnerabilities
 1. New theme, dearth of literature
 2. In order to develop effective mentoring experiences protégés felt it was necessary to be comfortable with the mentor and allow for vulnerabilities to show.
 4. Paying it forward
 1. Unique finding
 2. Important to help others develop and grow in nursing academia and this led them to want to be mentors to other faculty or students.
 3. Not specifically identified within the preliminary literature review.
 5. The role of gender
 1. Lack of male mentors - difficult for them to have someone to relate to and may not attract other males to a career in academia.
 2. Pros, cons, neutrals - Mixed responses from participants
 3. Need for understanding - Not applicable to just males, but anyone who feels less understood.
 6. Facilitators
 1. Supportive person -someone trusted to provide insight into academic role who is vested in the process.
 2. Connection with mentor - could be based on personal or professional characteristics.

7. Barriers

1. Time - due to other mentor and protégé responsibilities.
 2. Lack of support - individuals not invested and institutions not providing a plan or definition of mentoring
5. Limitations
1. Time – data collected at one point
 2. Participant recollection – based upon remembering experiences
 3. Sampling – purposive with three step approach
 4. Female researcher- explained confidentiality and use of pseudonyms
6. Recommendations for future research
1. Effective mentoring plans for nursing faculty
 2. Formal versus informal mentoring
 3. Mentor experiences
 4. Reasons for assuming mentor role
 5. Protégé’s responsibilities
 6. Study of males and other underrepresented groups
7. Implications
1. Nurses
 1. Role models in brochures, tv, and social media
 2. Professional organizations
 3. Information for young males about profession
2. Schools of Nursing
1. Individualized programs with guidelines
 2. Build trust
 3. Peer and informal mentors
 4. Monetary and non-monetary awards
3. Administration
1. Collaborative & inclusive environment
 2. Guidelines & role expectations
 3. Workload adjustments
 4. Confidentiality
3. Conclusion
1. What’s known – figuring it out, making connections, facilitators and barriers
 2. What’s new – early supporters, vulnerability, paying it forward, need for understanding
 3. Challenge - Commitment to mentoring programs to recruit and retain males and promote an environment inclusive of any underrepresented population in nursing academia to help diversify the workforce.

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Author Summary: Dr. Cristina Ortiz has been an Assistant Professor at Allen College in Waterloo, Iowa since 2012. She has six years of experience teaching BSN students and recently began teaching in the MSN program. She has served on a variety of committees such as the Office of Diversity Services for which she helped coordinate a mentoring program that matched underrepresented BSN students with practicing nurses. Dr. Ortiz has previous clinical experience in occupational health.