What is known

Nursing leadership influences nurse retention. Lack of leadership increases stress within the professional practice environment (PPE) that erodes workforce stability, and adds to the continued attrition rates of graduate nurses, thus having a considerable cost impact to both the health budgets and patient outcomes. This PPE stress is dealt with in various ways by the diverse workforce such as men in nursing who are underrepresented; therefore the attraction and retention of men is imperative to support a sustainable workforce. Professional socialisation of new graduate nurses major barrier is marginalisation, with nurses who are male often treated differently. For graduate registered nurses who are male (GRNM) the ability to change their communication styles to enhance assimilation into a female-dominant workplace aids in reducing this PPE stress and increases their retention.

THE STUDY

Purpose:

To investigate the lived experience of GRNMs with view of understanding how these nurses transition into the PPE and ultimately the nursing profession in the second phase of this longitudinal study. Thus opening the discussion on schemes that may assist with future recruitment and sustainability of males entering the nursing workforce.

Design & Methodology

INTERPRETATIVE PHENOMENOLOGICAL ANALYSIS (IPA)

Interpretative: double hermeneutics "Researcher is making sense of the participant, who is making sense of x" (Smith, Larkin & Flowers, 2009, p. 35)

Phenomenological: insider viewpoint of the GRNM lived experience

Idiographic as IPA focuses on the particular, the individual’s lived experience

Purposeful sampling: Snowball technique ensured expertise was obtained through the voiced experiences of 9 GRNMs about to commence the first year in their PPE.

Findings & Discussion

Second phase findings supports Duchscher’s 2007 the Stages of Transition Theory (Figure 2) in exposing the likelihood of crisis around the 4 to 6 month stage of newly graduated nurses commencement in their new profession. Leadership and collegial support, moreover the lack of, seeded doubts on whether nursing was the right career for the GRNMs. Unprofessional nurse to nurse communication and workplace marginalisation of GRNM adding to their doubts.

For the newly GRNM the added issue focused on the co-cultural aspect of working in a female-dominant profession; with their need to fit in, to be part of the team; thus is consistent with Orbe’s (1998) co-cultural communication model’s ‘outsider within perspective’ in relation to their professional socialisation.

Figure 3: Transition Shock Model

Consistent with previous literature:

• Constant pressure, both from within and from others to ‘hit the ground running’ leading to repeated expression of being overwhelmed and being afraid of their actions more so than lack of actions.

• Fear of making a mistake and feeling unsafe relates to ‘Transition Shock’ (Figure 3) impacting on the GRNMs’ confidence and self-image that heightened around the 4 to 6 month stage, “Transition Crisis.”

It was during this crisis stage the GRNMs felt that nursing leadership is paramount. Without explicit nursing leadership in the form of collegial support and caring behaviour within their PPE, the majority of the GRNMs revealed that they would have left nursing.

Overall, the GRNMs reinforced that a viable work environment is embedded in role modeling the nursing leadership characteristics of a welcoming, supportive and inclusive culture. This modeling starts with the welcoming of newcomers (including student nurses and graduates) into the workplace, through constructive support in their learning and assimilation into a no blame gender-neutral culture. Moreover, the acknowledgment of the newcomers’ status and the willingness to support them in their transition into the PPE is important in the retention of a sustainable nursing workforce.

Conclusion

Nursing leadership at all levels is at the forefront of recruitment and retention of nurses. Support for newly graduated nurses in the promotion of a proactive and engaging nursing profession and investment in leadership programs, especially of the minority groups such as men, cannot be underestimated.