

Rural Nurses' Experiences of Mentoring

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Introduction

Mentoring emerged as a support strategy for career advancement in nursing in the 1970s. Since that time the concept of mentoring has evolved in the literature as either a formal or informal process. The problem of workforce for Australian rural nurses prompted the introduction of mentoring into discourses produced concerning finding a solution to poor recruitment and retention rates. This study aimed to examine how rural nurses constructed their experiences of mentoring using a constructivist grounded theory design.

Constructivist grounded theory is an evolved form of traditional grounded theory that seeks to find out about issues of importance in participants' lives and explain these through abstract theory. Situated in a constructivist paradigm of inquiry it is relativist in its orientation, understanding that individuals' lives are made up of multiple truths and perspectives and that there is no one truth or reality that can be uncovered for all. Together the researcher and participants create co-constructions about the research area, which the researcher later reconstructs into an abstract theorisation that remains grounded in the data generated.

In this study interview data was generated with nine participants, two of whom shared their stories twice. Situational analysis was used in the form of situational and social mapping, an outcome of which was using the literature about the social world of Australian rural nurses as a secondary source of data. This additional analysis located participants' co-constructions within a wider context.

Findings from this study demonstrated that experienced rural nurses cultivate and grow new or novice rural nurses as a part of their practice. Cultivating and growing has several properties, precepting, accidental mentoring, mentoring and deep friendship. The impetus for this is that they live their work, which means living multiple perspectives of self in the communities in which they live and work. Passing on the knowledge and skills required to manage their worlds culturally, politically and clinically is achieved through a two-part process conceptualised as getting to know a stranger and walking with another.

These findings are significant in that they realise mentoring as a part of current experienced rural nurses' practice. However, until rural nurses had received some educational development as mentors they did not have a name for something that they were already doing indicating that there is a rich resource that already exists that could be drawn upon more fully to support new or novice rural nurses in the workplace. Of broader significance was the conceptualisation of live my work as a phenomenon experienced by all rural health professionals. Living and working in the same community has long been recognised as an influencing factor in rural health care practice. This study describes this experience more fully and analyses what this might mean and how it can be managed for a positive outcome.

Overall these findings add to the body of knowledge about rural nursing practice and mentoring through reconceptualising mentoring as an intervention that can be implemented, to being something that is a part of experienced rural nurses' current practice. Such an argument refutes traditional understandings of mentoring, while at the same time reframing it as an accessible, affordable strategy in addressing the problem of workforce for nurses generally.

Methodology

Constructivist grounded theory reflects the basic beliefs of constructivism as a paradigm of inquiry. Ontologically relativist, epistemologically transactional, methodologically dialectical, the researcher is a "passionate participant" as facilitator of multi-voice reconstruction' (Guba and Lincoln 2005, p.196). We believe that constructivist grounded theory has its roots in the work of Anselm Strauss and has evolved through his work with Juliet Corbin, exemplified by their use of techniques to enhance theoretical sensitivity, the treatment of the literature as additional source of data, axial coding, the conditional/consequential matrix, complex diagramming and the use of a storyline to identify the core category. Each one of these works to construct and reconstruct the data generated with participants, as opposed to uncovering an emergent truth in traditional grounded theory (Mills et al. 2006).

Live My Work

Live My Work conceptualises rural nurses' experiences of living and working in the same community. When interacting with others rural nurses use multiple perspectives of self to manage their relationships. These are:

- Community Member
- Health Care Consumer
- Nurse

The strategies that they use and their local knowledge about their communities are what they want to pass on to new or novice rural nurses through the processes of getting to know a stranger and walking with another. They communicate this information using the lenses of:

- Culture
- Politics
- Clinical Practice

Recommendations for Rural Nursing Practice

Cultivating and Growing Rural Nurses can be conceptualised and recognised as a series of supportive relationships dependent on trust, engagement and time. This could be achieved through short interactive workshops using a modified version of the original Association for Australian Rural Nurses' Mentor Development Workshop program. In this workshop precepting should be emphasised as influential in raising new or novice rural nurse's cultural, political and clinical awareness

Accidental mentoring is a new concept that needs to be introduced. Understanding that there is a place for short-term support is vital in new or novice rural nurses managing confronting situations in their worlds and maintaining their confidence. Retention rates of new or novice rural nurses could potentially be improved if accidental mentoring was recognised and fostered.

Rather than teaching mentoring as a skill to be acquired, recognising interactions that are mentoring is important in affirming experienced real nurses' life histories and existing practices.

Performance review tools for experienced rural nurses could incorporate cultivating and growing new or novice nurses as a way of recognising and affirming positive practices that contribute to building supportive workplaces that have high staff retention rates.

Time for cultivating and growing new or novice rural nurses needs to be allocated to facilitate experienced rural nurses in creating safe environments that promote establishing trust and engagement.

References

- Guba, E. and Lincoln, Y. (2005) Paradigmatic controversies, contradictions, and emerging confluences. In *Handbook of Qualitative Research*(Eds, Denzin, N. and Lincoln, Y.) Sage Publications, Thousand Oaks, pp. 191-215.
- Mills, J., Bonner, A. and Francis, K. (2006) The Development of Constructivist Grounded Theory. *International Journal of Qualitative Methods*, 5(1), Article 3.

Objectives of the Study

To explore and co-construct, through interview, participants' experiences of mentoring in relation to their rural nursing practice.

To locate rural nurses' co-constructions of mentoring in the wider context of their social world.

To construct a grounded theory of Australian rural nurses' experiences of mentoring reflective of both context and process.

Getting to Know a Stranger

Experienced rural nurses look after new or novice rural nurses. This begins by the experienced rural nurse either:

- Identifying Potential, or,
- Listening for Trouble

Naming the resultant relationship is important in building a foundation, implicit in which is setting boundaries. Experienced rural nurses set boundaries by talking about:

- Communication Styles
- Clarifying Expectations, and,
- Acknowledging Power Differences

Precepting and accidental mentoring are often the names used to describe the relationships that develop when getting to know a stranger. Accidental mentoring arises out of new or novice nurses experiencing a critical incident. The experienced rural nurse may only offer them short term support because they do not identify similar values and interests in each other. The bonding that resulting from such an identification enables the relationship to develop over time into mentoring and sometimes deep friendship.

Research Questions

What are rural nurses' experiences of mentoring?

What does mentoring mean for them in their practice?

What influences rural nurses' experiences of mentoring?

Walking With Another

If the experienced and new or novice rural nurse identify similar values and interests, over time their levels of trust and engagement with each other rise. Such an identification leads to the transformation of their relationship into mentoring or even deep friendship.

Walking with another is characterised by experienced rural nurses keeping things in perspective for the new or novice rural nurse through the creation of a safe environment. Experienced rural nurses role model behaviour and act as a critical friend to their mentee using the language of nurse chat.

Nurse chat describes the symbolic language that rural nurses use to communicate about their practice and how they live their work. Mentors teach their mentees nurse chat in their conversations together, as well as translating others use of nurse chat. Nurse chat has been identified as a topic for further research..

