

# Editorial



## Mentoring: A Strategy to Foster a Sense of Belonging

**M**any hospitals, schools, nursing organizations, states, and nurses themselves are seeking innovative solutions as the nursing profession faces challenges.<sup>1,2</sup> These challenges include staff shortages, increased numbers of inexperienced nurses in critical care, and new graduates leaving the bedside after only a few years in the clinical setting. Fear is reported as the most common negative emotion experienced by new graduate nurses in critical care; for example, fear of making mistakes, harming a patient, saying the wrong thing, and losing access to their preceptor following orientation.<sup>3</sup> At the other end of the spectrum, collegial relationships and a sense of belonging are associated with increased job satisfaction.<sup>4,5</sup> Mentoring is not new, but this low-cost strategy has helped many nurses to gain confidence, reduce fears, feel a sense of belonging, and advance successfully to new roles during their careers.

Throughout my nursing career, I have sought opportunities to mentor others, such as colleagues and students. After hearing the saying “write the book you want to read,” which is attributed to the author Toni Morrison,<sup>6</sup> I realized that this saying resonated with me because I have strived to be the type of mentor that I have wanted for myself. In addition to sharing my knowledge and insights with my mentees, I have also shared

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more difficult information, like perceived failures. As I reflect back on my nursing career, I want to help others learn what I wish I had known at various decision points, such as getting involved with a professional nursing association earlier in my career as a bedside nurse. As a first-generation college graduate, I would not have recognized my full potential within the nursing profession without the guidance of mentors.

Mentoring has a broad focus, including career development, professional advancement, personal growth, and psychological support.<sup>7,8</sup> Personal growth may include work-life balance and well-being. I relate to the concept of *work-life blend* or *integration* more than *work-life balance* because it feels more realistic than trying to spread time evenly between work and life.<sup>8</sup>

Roles such as coach and preceptor are sometimes confused with the role of a mentor. Coaching is typically task related, focusing on specific skills or challenges.<sup>9</sup> Dirks<sup>9</sup> describes multiple roles that may be filled by a mentor, with a coach being just one of them. Preceptors assist in the training of novice nurses to meet externally defined goals and timelines. Although it is not uncommon to set timelines and goals in a mentoring relationship, they are usually generated by the mentee.

Some mentor-mentee relationships will develop organically, whereas others may be more formal.<sup>10</sup> Selecting a mentor involves some reflection by the mentee, often based on their goals, which will help to locate a mentor who is a good match.<sup>11</sup> People often have multiple mentors throughout their career, because one mentor is unlikely to be able to meet all of the mentee's needs.

A mentor is someone who is a role model, advocate, and motivator,<sup>8</sup> and they typically have more experience compared with the mentee.<sup>12</sup>

A nurse can be a mentee in one relationship and serve as a mentor in another relationship. Consider second-career nurses who bring knowledge and skills from other educational or work backgrounds into nursing. A second-career nurse may benefit from having a mentor to help them adapt to the critical care nursing environment. They could also be a mentor or coach to other nurses who want to develop their skills in another area, like presenting at a conference. Mentees are not necessarily novice nurses. For example, an experienced nurse may serve as a mentor to a novice nurse, but could also be a mentee as they transition to another specialty area or a new management role.

Trust is one of the key ingredients in a successful mentor-mentee relationship.<sup>8</sup> In addition to being able to build trust, a mentor should have effective communication skills and be goal oriented, encouraging, insightful, empathetic, organized, and persistent. A mentor should also be able to address a wide range of topics, including nursing practice, work environment issues, career counseling, and personal advice.<sup>8</sup> A good mentor is supportive, has a positive attitude, and is willing to spend time with the mentee.<sup>12</sup> Although it may be more important for a formal mentor to have many or most of the attributes listed in this paragraph, an informal mentor may have only some of these characteristics. It is also important for mentors to remain humble and kind, open to sharing their own challenges,<sup>13</sup> and remember how they felt when they began their nursing career. (Although many years have passed since I began my career in critical care nursing, I still remember the sense of intimidation and pressure to perform like the experienced nurses around me.)

Mentoring is an active process that requires work from both the mentor and the mentee to be successful. Mentees should be open to receiving constructive feedback, be proactive, set clear goals, listen to and act on recommendations, be willing to push themselves beyond their comfort zone to facilitate growth, and participate in reflective practice.<sup>10</sup> It is important that there is a good match between the mentor and the mentee. Both mentor and mentee should have realistic expectations and recognize that the relationship will evolve over time. Mentoring relationships can be very rewarding for both the mentee and the mentor.

Although the mentor-mentee relationship may develop organically, the recent loss of experienced critical care nurses may make these matches more difficult to achieve. Nurses seeking a mentor can look to professional associations, such as the American Association of Critical-Care Nurses or Sigma, nurse leaders in their workplace,

professional conferences, alumni associations, or online professional platforms. Reach out and ask for an introduction from someone who already knows the person you are seeking as a mentor. With distance technology available, it is no longer necessary to have a mentor within the same unit, although it remains important to develop relationships with local colleagues to help develop a sense of belonging.

If you are not currently in a mentor-mentee relationship, I hope you will consider getting involved. Depending on where you are in your career, consider reaching out to a prospective mentor or mentee. Discuss options with your manager and review information from your professional organization and/or your alumni association. Whether you are the mentor or the mentee, a good match will reap benefits for everyone involved. CCN

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*The statements and opinions contained in this editorial are solely those of the Editor.*

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