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### Partnership for development: A peer mentorship model for PhD students

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#### ABSTRACT

Formal mentoring relationships socialize Doctor of Philosophy (PhD) students to their current and future roles as nursing scholars. Despite formal mentoring, some students may desire or benefit from additional mentoring in an informal setting. Informal mentoring complements the one-to-one relationship students develop with a primary faculty mentor or dissertation chair. This manuscript describes the development, implementation, and evaluation of a student-driven, peer mentorship model, titled Partnership for Development. This small group, peer mentorship model was implemented in a PhD program at a School of Nursing during an academic year. Five student peer facilitators organized a total of 32 PhD students, 2 post-doctoral associates, and invited 5 faculty to participate. Data includes pre- and post-implementation surveys completed by the students and peer facilitator field notes. Student reported post-participation benefits included: getting to know faculty in an informal setting (n=6), socializing with students from other cohorts (n=6), and obtaining a sense of camaraderie with other PhD students (n=5). We recommend peer mentorship for other PhD programs as a way to socialize PhD students into the role of nurse scientist and assist students during their tenure as a PhD student.

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#### Introduction

Formal and informal mentoring by faculty and peers socialize doctoral (PhD) students at a School of Nursing into the academic, research-focused environment and their role as they become future nurse scientists (Fang, Bednash, & Arietti, 2016; Goodfellow, 2014; Nehls, Barber, & Rice, 2016). These mentoring relationships are critical in creating future nursing scholars who serve as stewards of the discipline, helping them to smoothly transition from a PhD student role to a faculty role, allowing them to be successful as nurse scientists following graduation, and achieve national standards set forth to advance the nursing profession (American Association of Colleges of Nursing, 2010: Gill & Burnard, 2008; Institute of Medicine, 2011; Sawatzky & Enns, 2009). Additionally, the nurse faculty shortage will be lessened by increasing the number of PhD prepared nurses (American Association of Colleges of Nursing, 2014). Research estimates that almost half of PhD prepared nurses leave academia following graduation (National Research Council (US) and Institute of Medicine (US) Committee on Opportunities to Address Clinical Research Workforce Diversity Needs for 2010, 2006), and that a larger portion of younger PhD prepared nurses choose careers other than academia (American Association of Colleges of Nursing, 2005, 2015), contributing to the nursing faculty shortage. Increasing the amount of PhD prepared faculty in academia is paramount; this faculty will play a large role in teaching and ushering the next generation of nurses who will advance the care of patients at the bedside, forge new research, and continue to expand the discipline at large.

An environment conducive to personal and professional growth during one's PhD program is created through positive interactions with peers and faculty. Positive interactions include 'checking-in', providing advice, being present, and addressing the dynamic nature of challenges and successes that occur throughout the course of a PhD program (Cohen, 2011; Fang et al., 2016; Pancheri et al., 2013; Smith & Delmore, 2007). Students feel supported and socialized into the professional academic community when faculty model teaching, scholarship, and service to the profession, along with peers who provide mentoring and guidance on role transition (Armstrong, McCurry, & Dluhy, 2016; Fang et al., 2016; Goodfellow, 2014). Notably, the lack of good mentorship becomes apparent when students report that their personal or academic community is non-supportive. Students in an unsupportive community often feel socially isolated from peers and family, struggle with changing personal relationships, and often report having a poor relationship with one's primary mentor due to lack of communication, disparate personalities, or by having an unresponsive mentor (Cohen, 2011; Nehls et al., 2016; Pancheri et al., 2013). Additionally, those students who lack a support system or a good relationship with any faculty mentor during the duration of their PhD degree program are at increased risk for program withdrawal, greater time to degree completion, and negative psychosocial outcomes (e.g., anxiety, depression,

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stress) (Cohen, 2011; Nehls et al., 2016; Pancheri et al., 2013). Therefore, identifying methods to create and sustain a community that is both personally and professionally supportive during challenging times and celebratory during the good times is essential to ensuring the success of students while obtaining their PhD.

Mentoring models exist in graduate programs to provide students with personal and professional support and guidance during their programs. These models can be one-to-one (e.g., peer to peer, study partner, primary faculty mentor to student), group (e.g., study groups), one-to-many (e.g., one leader to many students), and may or may not include a faculty member. Formal mentorship models are those that have become part of the infrastructure of a degree program and are incorporated into the core curricula. A prime example of a formal mentoring relationship in a PhD program is between student and their dissertation chair; usually this relationship lasts for all, or the majority of, a student's degree program. Another example of a formal mentoring model is the Advisory Dean mentoring model typically located in Schools of Medicine (Macaulay et al., 2007; Puckett, Graham, Pounds, & Nash, 1989; Swan-Sein, Mellman, Balmer, & Richards, 2012). This model provides opportunities for faculty and students, typically within the same year, to connect in a smaller group setting to discuss relevant topics, and enhance their professional development during their medical school training at regularly scheduled times (Macaulay et al., 2007; Murr, Miller, & Papadakis, 2002; Sastre et al., 2010; Swan-Sein et al., 2012). Typically, these groups include many students and one faculty member who provide support, guidance and information.

Informal mentoring models are often groups of students who come together to provide support, friendship, and guidance during school (Pancheri et al., 2013; Smith & Delmore, 2007). For example, Pancheri et al. (2013) noted that a collegial support group of students in their dissertation phase at a School of Nursing provided both social and professional benefit. Students met in a chosen location, not necessarily at their school, and discussed both personal and professional topics. One commonality between the formal and informal mentoring groups is the homogeneity of the members as most groups typically contain students in the same stage in the degree program (e.g., dissertation phase, first year of medical school). However, students gain insight about life as a PhD student, obtain support and advice on program requirements, and discuss challenges presented during dissertation research in informal interactions with peers in their program. While a shared experience may be helpful, we believe that a heterogeneous peer mentoring structure composed of students in different levels of the professional degree program may be of benefit to PhD students. Given the usefulness of both types of mentoring models, both are necessary to establish and create a supportive and collaborative environment within a PhD program wherein students feel as though they have the ability to succeed to their greatest potential. However, informal mentoring by its nature is less often designed with a sustainable organizational structure.

The purpose of this manuscript is to describe the development, implementation, and evaluation of a student-led, peer mentorship model for PhD students and post-doctoral associates in a School of Nursing. The mentorship model titled, Partnership for Development (POD), successfully provided professional and personal socialization and guidance during the 2015–2016 academic year.

PODs program design and implementation

#### Setting

PODs is a peer mentorship model implemented in a PhD Program at a School of Nursing. All students currently enrolled in the program have a Bachelor of Science in Nursing and several have a Master of Science in Nursing or in another related discipline. The style of this PhD program is an on-campus experience with full-time coursework for the first two years. Students are funded for up to five years, and are encouraged to seek outside funding to support research. Years one and two consist of core nursing research courses and electives of the student's choice.

Years three and beyond include additional courses to supplement one's program of research, engagement in pilot research, primary data collection, and completion of the dissertation. This PhD community consists of domestic and international PhD students, post-doctoral associates, and PhD program faculty, with diverse research interests, and academic backgrounds, clinical experiences, and cultural knowledge. A total of 34 participants (32 students representing five cohort years and two post-doctoral associates) were enrolled in the peer mentoring model at the beginning of the academic year. Additionally, five faculty members were invited to participate in the PODs.

#### Rationale

Student leaders created PODs to complement the current faculty mentorship that students receive in our program via their assignment to a primary advisor or mentor. Our PhD program has two peer-elected student representatives that attend monthly PhD Program Committee meetings. These two students communicate student comments, concerns, and suggestions regarding the PhD program to faculty members on a monthly basis. Prior to the implementation of PODs, several students expressed a desire for additional mentoring to the PhD Program Committee student representatives. At that time, our program had two mentoring systems in place: (1) a primary faculty mentor who guides the student from admission until graduation and who typically becomes the Chair of the dissertation committee; and (2) a peer mentor who is a fellow PhD student a year or two ahead in the program. Despite the presence of these two systems, students desired information and perspectives from other sources (e.g., students in other cohorts, faculty) and advice regarding a multitude of formal (e.g., dissertation advice, grant writing) and informal issues (e.g., work-life balance) about their role as a PhD student and beyond.

#### Program development and implementation

A mentoring workgroup was developed to address student concerns in summer 2015. This group included four students and two faculty mentors with the goal of assessing the overall mentorship system within the PhD program. The workgroup identified best mentoring practices and programs within our University and across the nation in both Schools of Nursing and other disciplines. The work group led a role-playing session with faculty at a PhD faculty meeting and presented vignettes focused on common student mentoring issues, which led to a discussion about student concerns. The workgroup presented the idea of a student-led, small group mentorship program at this meeting and through discussion, all faculty members came to agreement and were in support of creating PODs.

With the PhD Program administration and faculty support, the workgroup outlined the structure of the PODs program. Five diverse PODs were created with a random spread with regards to gender, race/ethnicity, country of origin, stage in the program, and when possible, research interests. PODs were purposefully kept small in order to facilitate personal interactions with the hope of creating more intimate connections. Ideally each POD contained at least one student from each cohort year including a post-doctoral associate, a faculty member, and a peer facilitator.

Peer facilitators. Each student member of the workgroup (DF, RH, AL, and TM), all PhD candidates, became a peer facilitator. An additional PhD student (AV) was invited to be a peer facilitator for the fifth group. The workgroup purposefully designed the PODs program to be informal and casual. However, the workgroup stipulated that PODs: (1) were to meet at least once a month during the academic year; (2) student and faculty attendance was not required but strongly encouraged; (3) the peer facilitator would coordinate the meetings based upon the faculty and student schedules; (4) meetings did not have a set agenda, and any topic could be discussed; (5) each individual PODs group determined the meeting location, date, and time; (6) all conversations within a PODs meeting were confidential; and (7) faculty would not share

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