PERCEIVED MENTORING NEEDS AMONG NURSING FACULTY MEMBERS IN JORDAN:

AN EXPLORATORY STUDY

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Committee Decision

This Thesis (**Perceived Mentoring Needs Among Nursing Faculty Members in Jordan: An Exploratory Study**) was successfully defended and approved on **November 2020.**

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Dedication

This work is dedicated to my wife, my daughter, and my whole family. Their continuous support and words of encouragement kept me going throughout my journey.

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First and foremost, all thanks and gratitude are due to the Almighty Allah who guides us along the straight path and who gave me the strong will and persistence to keep going to finally achieve my goal.

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PERCEIVED MENTORING NEEDS AMONG NURSING FACULTY MEMBERS IN JORDAN: AN EXPLORATORY STUDY

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ABSTRACT

Background: Structured mentoring programs can help novice nursing faculty transition with ease to the new academic role and enhance their career advancement.

Purpose: To explore perceived mentoring needs among faculty members in nursing schools in Jordan and to examine differences in mentoring needs by faculty members' demographic characteristics (i.e. academic rank, type of university, years of experience as a full-time nursing faculty, and gender).

Methods: A cross sectional survey that used a convenience sampling technique was employed to answer the research questions of this study. A total of 147 full-time nursing faculty members from thirteen public and private universities completed the study questionnaire (i.e. The Faculty of Nursing Mentoring Needs Assessment).

Results: Jordanian nursing faculty highly valued all responsibilities of mentors, characteristics of a good mentor, personal benefits of being a mentor, and benefits to the faculty of nursing listed in the study scale. Inadequate information regarding the informal/unspoken rules and inadequate information regarding the university environment were the most significant stressors for new Jordanian nursing faculty. Lack of supportive infrastructure and recognition/compensation for the role were the most significant barriers to mentoring. There were no statistically significant differences in

faculty members' perceived mentoring needs by their academic rank. Faculty members working in private universities perceived more benefits of being a mentor compared to faculty members working in public universities.

Conclusions: The overwhelming majority of Jordanian nursing faculty highly valued mentoring and benefits of mentoring to themselves and the faculty of nursing, however, they perceived a lack of mentoring experiences.

Keywords: Mentoring, Mentorship, Novice Nursing Faculty, Jordanian, Surveys and Questionnaires, Education.

1. Chapter One: Introduction

1.1 Study Background

The nursing shortage is a problem faced by different countries across the globe, such as North America, Great Britain, Germany, and Poland (Marć, et al., 2019). The literature cites several factors contributing to the increased demand for the nursing workforce and the apparent shortage of nurses globally. These included global demographic changes, population aging, families lessened care-giving capacity, rise in the prevalence of chronic illnesses and its related management needs, poor planning, ineffective utilization of nursing resources, poor work environments, improper staffing, violence in the health care setting, and a deficit in the field of nursing education (i.e., faculty, classrooms, and clinical space in graduate and undergraduate nursing programs) (Fang, et al., 2016; Fischer, 2016; Haddad & Toney-Butler, 2019; Marć, et al., 2019). Shortage of bedside nurses can have a direct negative impact on the quality of care and patient safety (e.g., medication errors, rate of nosocomial infections…etc.) as well as on nurses' job outcomes including job satisfaction, career commitment, and retention (Aboshaiqah, 2016; Jarrar, et al., 2018).

The nursing shortage is not limited to bedside nurses, as there is also a documented shortage of nursing faculty in many countries. Factors responsible for the scarcity of nursing faculty cited in the literature included the global migration of nurses, persistent devaluation of faculty by academic programs, disincentives, an overall reduction in fulltime equivalent faculty positions, an inadequate number of teaching facilities, low salaries, older age, changing faculty workload demands, alternative career opportunities, and a diminishing pipeline of students preparing for faculty positions (Byrne & Martin, 2014; Nardi & Gyurko, 2013; Wyte-Lake, et al., 2013).

A shortage of qualified nursing faculty can indirectly impact the health care system and the delivery of quality nursing care as nursing education is the basis for nursing practice and thus the graduation of adequate numbers of qualified bedside nurses (Vandyk, et al., 2017).

Jordan, on the other hand, has shown a significant advancement in health care services and graduating a vast number of registered nurses to work inside and outside the country. Jordan has witnessed a remarkable increase in the aggregate of health care - personnel compared to its population in the last decade. For instance, in 2013, nurses and midwives composed approximately 45% of health care providers in the country (JNC, 2016). However, Jordan is not an exception to the problem of nursing shortage. Jordan also suffers from the immigration of individuals who have received advanced training at home also known as brain drain because a large proportion of Jordanian nurses leave their jobs in the country to work in the Gulf or Western countries once they achieve the minimum required clinical experience of 1-2 years (Al-Hamdan, et al., 2017) leaving Jordanian health care settings understaffed. Although there is no documented shortage of nursing faculty in Jordan, the brain drains of Jordanian faculty members, especially to Gulf countries, is an apparent phenomenon. Factors responsible for the brain drain of Jordanian faculty members are multidimensional factors. Economical factor such as low salaries, hard economic conditions currently faced by the country, high living costs, social factors include lack of sufficient recognition of scientists, and political factors include lack of academic freedom and lack of democracy (Al-Zboun, 2019). The phenomenon of brain drain would negatively affect the quality of higher education in the country (Albalas, et al., 2019).

In light of the documented shortage of nursing and its potential negative impact on the health care system and the delivery of quality patient care, there have been

several calls from international and professional organizations (e.g., World Health Organization, Institute of Medicine) to implement strategies aimed at tackling the shortage of nursing faculty in order to alleviate its negative impact on the delivery of health care services and patient outcomes. Improving working and employment conditions, improving salaries, appointment of academic nurse educators to the role of advanced practice registered nurses, having a collaboration among health care organizations, schools of nursing, and state boards of nursing, have been recommended by professional nursing organizations and researchers as possible effective strategies to tackle the pressing problem of nursing shortage (Gazza, 2019; Marć et al., 2019). Mentoring, especially for novice nursing faculty, has been advocated as one possible successful remedy to alleviate the challenges faced by novice nursing faculty in their transition into the academic life and thus ensure a successful transition and increase retention in the new role as a nurse educator(Summers, 2017).. Mentoring is "a voluntary alliance between an experienced senior professional and a less experienced one, for the dual purposes of career development and enhancement of the profession" (Byrne & Keefe, 2002,p 391).

Mentoring could be either formal or informal. Informal mentoring is "an independent activity initiated by a mentor, the person who acts as a guide, adviser, and provider of support, or by a mentee, the person who receives guidance, advice, and support" (Harrington & Marshall, 2014). Formal mentoring relationships are often those organized by administration with the expectation that both mentees and mentors will participate (Harrington & Marshall, 2014).

The benefits of mentoring are apparent in different higher education disciplines. Mentoring increases the academic achievement and instructional leadership, improves the learning environment, improves mentee's capacity to understand the surrounding,

increases the psychosocial level of the mentee, and to enhance relationships and motivation in the academic discipline. Further, mentoring has an apparent positive effect on nursing faculty scholarly productivity, career success, skill development, job satisfaction, academic, personal growth, self-awareness, and reciprocal learning (Brook, et al., 2018; Liou, et al., 2016; Nowell, et al., 2017).

1.2 Problem Statement

The shortage of qualified nursing faculty is a well-documented problem in the literature. The scarcity of nursing faculty could have an influential impact on the delivery of health care services as it may lead to a decrease in the number of enrolled nursing students and thus the number of graduate nurses, which would further heighten the problem of bedside nurses' shortage. Also, the shortage of nursing faculty could influence the quality of graduated registered nurses and their competency in the provision of safe quality health care (Gazza, 2019). Job satisfaction is one of the most influential factors that can affect faculty members' intent to stay at their current institutions and thus a factor that can be intervened on to improve faculty retention and decrease their turnover (Crisci, et al., 2019; Lee, et al., 2017).

Further, evidence has shown that the work environment has a direct impact on job satisfaction and intent to stay. For instance, factors such as lack of preparation for the new faculty role, workload and stress, stage of career development, motivation, and productivity may affect job satisfaction and retention rate among nursing faculty (Candela, et al., 2015).

Mentoring in general and the provision of formal mentoring, in particular, have been shown to improve faculty members' transition to the new faculty role, enhance the education processes, increase job satisfaction, intent to stay, and retention of high-quality faculty staff (Mylona et al., 2016). Besides, benefits of formal mentoring

programs included improving faculty morale and retention, increasing productivity and job satisfaction, creating relationships with reciprocal human interactions, evoking emotional attachment, and increasing collaborative activities (Cullen et al., 2017).

On the other hand, despite conducting a wide range of studies on mentoring and its effect on career outcomes among nursing faculty (e.g., organizational commitment, job satisfaction, and intent to stay), there is a marked lack of studies on perceived mentoring needs and perceived obstacles to mentoring among nursing faculty members in Jordan. Further, there is a marked lack of studies on stressors faced by novice nursing faculty.

1.3 Significance of the Study

Nursing faculty turnover and shortage can decrease the number of educated nurses, increase bedside nursing shortage, threaten the health care needs, increase the cost of health care, and affect faculty teaching and research productivity. (Byrne & Martin, 2014; Gerolamo, et al., 2014; Kowalski & Kelley, 2013; Wyte-Lake et al., 2013; Yedidia, et al., 2014).

Nursing schools continuously suffer from a shortage of qualified nurse educators to meet the demand to graduate sufficient numbers of nursing students. Different strategies were implemented to solve this issue, such as providing mentoring and educational opportunities that have the potential to ease the transition obstacles that nurse educators face and guide them through their work. Retention may be enhanced when the educators get acquainted with their job description criteria (Clochesy, et al., 2019; Feldman, et al., 2015).

There is a vast number of studies on mentoring and its impact on career outcomes among nursing faculty members. These studies have shown that provision of the effective mentoring program helps novice faculty members transition into the new academic role, minimize the impact of job stressors on their career outcomes, and

ultimately improve the quality of nursing education and faculty retention (Cullen et al., 2017; Jane, et al., 2015; Muschallik & Pull, 2016; Mylona et al., 2016). However, the overwhelming majority of these studies investigated nursing faculty members from Western countries. There is a marked lack of research on mentoring among nursing faculty members in Jordan. No research has examined Jordanian nursing faculty members' perceived mentoring needs and stressors faced by novice Jordanian faculty members. Thus, this study is significant because it addresses this gap in the literature. Gaining an understanding of Jordanian nursing faculty members' perceived mentoring needs may help generate interest in developing mentoring programs in schools of nursing in Jordan. Besides, findings of this study may support future research, and culturally sensitive interventions and instruments which would ultimately add to the body of scientific literature in the area of mentoring in higher education.

1.4 Purposes of the Study

The purpose of this study was to explore the perceived mentoring needs among faculty members in nursing schools in Jordan. This study further intended to examine the differences in mentoring necessities by faculty members' demographic characteristics (i.e. academic rank, type of university, years of experience as a full-time nursing faculty, and gender).

1.5 Research Questions

The following research questions guided this study:

1. What roles/responsibilities of mentors are important to Jordanian nursing faculty?
2. What characteristics of a good mentor are important to Jordanian nursing faculty?
3. What are the perceived personal and faculty's benefits of mentoring among Jordanian nursing faculty?
4. What are the perceived stressors for new faculty among Jordanian nursing faculty?

5. What are the perceived obstacles/deterrents to mentoring among Jordanian nursing faculty?
6. Are there any differences in perceived mentoring needs among Jordanian nursing faculty by their demographic characteristics (i.e. academic rank, years of experience, gender, type of university)?

1.6 Definitions of the Study Variables

Mentoring is defined as a "voluntary alliance between an experienced senior professional and a less experienced one, for the dual purposes of career development and enhancement of the profession" (Byrne & Keefe, 2002,p 391).

Nursing faculty is a registered nurse who holds minimum a Master of Science Degree in nursing and works with nursing students in the classroom and clinical learning environments.

Novice nursing faculty is a faculty member who has five years of teaching experience or less (American Association of Colleges of Nursing, 2020).

2. Chapter Two: Review of Related Literature

2.1 Search Strategy and Search Terms

The following electronic databases were utilized for locating relevant literature: CINHAL, Science Direct, Google Scholar, and EBSCO. The terms used for determining relevant literature included mentoring, mentoring needs, nursing shortage, nursing faculty, novice nursing faculty, stressors, challenges, nursing faculty shortage, and Jordan. Different combinations of these keywords were utilized during the search process using the Boolean operator "and." Further, except for seminal studies, or when a limited number of published studies on any of the essential keywords could be identified, the search was narrowed to locate only articles published between 2013 and 2019.

The major themes identified in the literature that will be discussed in the following sections of this chapter include nursing faculty shortage and associated factors, stressors faced by novice nursing faculty, mentoring in higher education, and mentoring among nursing faculty.

2.2 Nursing Faculty Shortage

Different countries worldwide suffer from nursing faculty shortage. For instance, Oermann, Lynn, & Agger (2015) explored the faculty shortage in the associate degree in nursing (ADN) programs of the United States by examining faculty openings in AND programs and identify the intentions of directors to hire nurse educators with doctoral degrees in 554 ADN programs. The researchers found that 171 of participating program directors reported a nursing faculty shortage in their local area. The researchers described the cited reasons stated by participating directors for faculty shortage as the school's rural location, other nursing programs in the area leading to competition in hiring nurse educators, and low salaries.

Many factors have been cited in the literature as contributing to the shortage of nursing faculty. Derby-Davis (2014) conducted a descriptive study aimed to explore the factors that predict nursing faculty's job satisfaction and intent to stay in academia with a convenience sample of 134 nursing faculty teaching in baccalaureate and graduate nursing programs in the state of Florida, USA. The researcher found that causes of faculty shortage included: a decline in enrollment in Ph.D. programs and low salaries. This study was limited by the selection of a convenience sample, resulting in potential sampling bias, thus limiting the generalizability of its findings.

Evans (2013) conducted a descriptive study to identify what nurse educators believe will help build the nurse faculty workforce in a time of registered nurses and nurse faculty shortages with a sample of more than 2,100 nurse educators of different degrees in nursing. The researcher reported that the aging of the nursing workforce and a compensation inequity were associated with the nursing faculty shortage.

Fang & Bednash (2014) conducted a survey study to analyze attrition of full-time faculty from nursing schools offering baccalaureate and graduate programs at the national level between 2010 and 2011. The researchers recruited a total of 15,365 fulltime faculty members in 2010, of which a total of 1,806 were identified in the 2011 survey as having left full-time positions. Factors found to be related to nursing faculty attrition were retirement and seeking nonacademic nursing positions.

Flynn & Ironside (2018) conducted a survey study to examine burnout among a sample of 146 midlevel academic nurse leaders and their association with their intent to leave the organization. The researchers reported that burnout was positively associated with faculty members' intention to leave their current organization. The small sample size limited this study.

Yedidia et al. (2014) surveyed a nationally representative sample of 3,120 full-time nurse faculty members in 269 schools to explore factors associated with faculty attrition from academia. The researchers found that the aging of faculty members, low salaries, heavy workload, and burnout was associated with nursing faculty attrition from academia. This study was limited by the use of a cross-sectional design, which limits the ability to identify the causal relationships between these factors.

Candela, et al. (2015) conducted a survey study to investigate the relations among several factors regarding the academic context within a nationally representative sample of 808 U.S. nursing faculty. They found that teaching load, low salary, lack of administrator's support, and job dissatisfaction were negatively contributing to faculty intent to stay in the organization.

Finally, Grassley, et al., 2016 conducted a meta-synthesis of qualitative literature to describe the experience of expert nurse clinicians in their role transition to novice nurse educators in an academic setting by reviewing 11 primary studies. They found that the difficulty of the transition from expert nurse clinician to novice faculty can play a role in faculty shortage.

2.3 Stressors and Challenges Faced by Novice Nursing Faculty

Academia has a different culture as reflected by different policies and rules that may differ from real-life practices; the transition from a clinical to an academic role holds many stressors and challenges.

Jeffers & Mariani (2017) conducted a study to explore the influence of a formal mentoring program on career satisfaction of novice full-time nurse faculty in academia among 124 participants. They found some challenges the novice faces when he or she transitions to an academic role, including the shift from a patient-focused environment to a student-focused environment, trying to build relationships with other faculty, lack

of mentoring, inappropriate behavior by mentors, and feeling alone and abandoned. This study was limited by the low response rate (i.e., 17%), the large volume of missing data, and the presence of a small number of novice faculty members who participated in formal mentoring programs among the respondents.

Brown & Sorrell (2017) conducted a qualitative case study to explore the challenges that novice educators face upon hire in a nursing program. The key challenges cited by study participants included the diverse role of nursing educators, workload, additional courses, or a course where content is unfamiliar, and deficiency of academic knowledge.

Singh, et al., (2019) conducted a mixed-method systematic review to understand occupational stress faced by nurse academics. The researchers revealed that challenges faced by the nursing academics included burnout, workload, and adapting to change.

Mann, et al.(2017) conducted a qualitative study aimed to better understand how novice clinical adjunct faculty described their lived experiences in their significant role transition. The participants reported some barriers they faced when they transit to the academic field, which included a lack of relationships with the staff, workload, fear of negative student evaluation, and low salary.

In summary, the review of the relevant literature revealed that there are several significant challenges faced by novice faculty when they transit to the academic role including the shift from a patient-focused environment to a student-focused environment, building relationships with other faculty, lack of mentoring, workload, deficiency of academia knowledge, and low salaries.

2.4 Mentoring in Higher Education

Mentoring has been widely used in different specialties in higher education to help new faculty members develop their academic and leadership skills and advance in their academic careers.

Muschallik & colleague (2016) conducted a study to explore the impact of the mentoring provision on mentees' research productivity, using a self-collected dataset of researchers in business and economics from Austria, Germany and the German-speaking part of Switzerland. The researchers found that mentees' informal mentoring programs tended to be more productive than comparable researchers who did not participate in a formal curriculum – irrespective of whether these instead had an informal mentor or not. Further, the results of the study indicated that researchers who only had an informal mentor were not more productive than those who did not have a mentor. This study had two limitations: the response rate for the survey was about 10%, and males were over-represented in the survey and came mostly from the field of business administration. In their second study, Muschallik & colleague (2016) looked at the role of mentoring in overcoming the challenges faced by researchers to fulfill the requirements to tenure, collected a dataset of 368 researchers and found that formal mentoring programs increased research productivity among researchers while informal mentoring did not. One limitation of this study was that the researchers only analyzed whether or not a researcher has or had a mentor.

Additional research in higher education identified further benefits of mentoring to a mentee, mentors, and the institution (Kalpazidou, et al., 2016) conducted a pilot study of a mentoring program for early-career female researchers to identify the benefits of the mentoring program for mentees, mentors and the institution. They found benefits for the mentees to include guidance to career planning, competence awareness, support

building professional and research networks, and moral support. Benefits for the mentors included: professional development, institutional recognition, and personal satisfaction. Furthermore, benefits for the institution included: strengthening the research environment, attracting and retaining young, competent researchers, motivated and equipped faculty members to work successfully within academia. However, this study was limited by the small sample size and the lack of a comparison group.

Lunsford, et al., (2018) conducted a survey study to understand faculty mentoring experiences across career stages and the influence of mentoring relationship quality on job satisfaction among a sample of 415 faculty members. They found that mentoring improved job satisfaction.

Mylona et al. (2016) conducted a survey study to examine associations between formal mentoring relationships and aspects of faculty members' engagement and satisfaction among a sample of 11 953 clinical medical faculty respondents. The researchers have cited that mentored faculty members had higher levels of satisfaction and more positive perceptions of their roles in the organization compared to a non-mentored faculty member. A limitation of this study was a possible response bias by gender, race, and rank, as women and majority race faculty (i.e., White) were overrepresented in the respondents' pool.

Stubbs et al. (2016) conducted a survey study to collect information about the types, frequency, importance, and satisfaction with mentoring received among academic family medicine faculty, and to identify variables associated with receiving high-quality mentoring. The researchers recruited a sample of 1029 faculty members. They found that high-quality mentoring positively affected job satisfaction, decreased stress, and increased interest in pursuing professional development and leadership opportunities. This study was limited by the fact that it was a single-site, cross-sectional survey.

2.5 Mentoring among Nursing Faculty

There have been several studies that were conducted to evaluate the impact of the mentoring provision on career transition among novice nursing faculty, career commitment, and job satisfaction.

In 2015, Candela, Gutierrez, & Keating conducted a survey study to investigate the relations among several factors regarding the academic context within a nationally representative sample of 808 U.S. nursing faculty. They found that workload, stage of career development, generational membership, and sense of feeling welcome and supported, perceptions of productivity, motivation, productivity, and perceived teaching expertise all can influence faculty members' job satisfaction and intent to stay at the organization.

Lee et al. (2017) conducted a retrospective study to analyze variables of relationships with nurse faculty job satisfaction and intent to stay using secondary data collected throughout the United States. Over 1,350 nurse educators were included in the survey. They found that a supportive work environment, age, and leadership are factors that may increase job satisfaction and intent to stay in nursing education.

Stegen & Wankier (2018) conducted a survey study to determine whether creating "an attitude of gratitude" in the workplace would increase job satisfaction and collaboration among faculty in a school of nursing. The study sample included 51 faculty participants. The findings of this study showed an improvement in overall job satisfaction. This study is limited by the use of convenience sampling of faculty from one school of nursing, which limits the generalizability of its results.

Jane, et al. (2015) conducted an integrative review to identify the essential components of a comprehensive mentoring program to facilitate a positive transition experience from expert clinicians to novice nursing faculty. The authors reviewed a total of 17 peer-reviewed articles and five Web sites. They identified formal preparation for

teaching, guidance navigating the academic culture, and a structured mentoring program as essential to clinicians' successful transition to the academic nursing faculty role.

Heydari, et al. (2015) conducted a study to explore perceived lived experiences of Iranian novice nursing faculty in their professional roles and to provide recommendations for nursing educational administrators to plan novice faculty empowering programs more efficiently. The sample included nine faculty members. Study participants indicated that formal programs such as workshops are not effective in empowering novice nursing faculty; instead, they can be better enabled by other approaches such as formal mentoring programs where they can safely transit into academia under the supervision of experienced colleagues. Further, study participants indicated that formal mentoring programs might facilitate the socialization process of novice faculty to academic and clinical fields.

Hafsteinsdóttir, et al. (2017) conducted a systematic review of 15 studies investigating leadership programs and mentoring for postdoctoral nurse researchers. They explored the influence of leadership program and mentoring on research productivity, research career development, leadership knowledge and skills, nurses' health and well-being, staff relationships, work culture and collaboration, salaries, and postdoctoral nurses' experiences. The findings showed a positive influence of mentoring on research productivity, nurses' health and well-being, staff relationships, work culture, and collaboration.

Jeffers & colleague (2017) conducted a mixed-method study to explore the influence of a formal mentoring program on job satisfaction of novice full-time nurse faculty in academia. The researchers recruited a sample of 124 nurse faculty. They found that there was no effect of the mentoring program on both and intent to stay. This study was limited by the low response rate (i.e., 17%), the large volume of missing data,

and the presence of a small number of novice faculty members who participated in formal mentoring programs among the respondents.

Nowell, et al. (2017) conducted another mixed-methods systematic review study to identify and evaluate the nature, strength, and quality of the evidence for mentoring in nursing academia. The authors reviewed a total of 50 studies that mostly originated from North America and Australia and found that the provision of mentoring positively influenced job and career satisfaction.

Bohlender-Walker (2019) conducted a survey study to investigate the effects of mentoring of nursing faculty on job satisfaction and intent to stay at their current academic institution. The sample included 172 baccalaureate level nursing faculty. The results of this study indicated that mentoring increased job satisfaction and retention of nursing faculty.

2.6 Summary of the Review of the Literature

The review of the relevant literature revealed that there are several factors that interplay and influence job satisfaction and intent to stay among nursing faculty, including workload, job stress, perceptions of productivity, leadership support, salary, recognition, and work conditions. Further, the review of the relevant literature revealed that mentoring is a beneficial intervention in nursing education. Provision of mentoring may increase productivity, ensure clinicians' successful transition to academic nursing faculty, increase levels of satisfaction and perceptions of the roles in the organization, enhance organizational and professional commitment, decrease stress, and increase interest in pursuing professional development and leadership opportunities, (Bohlender-Walker, 2019; Jane, et al., 2015; Hafsteinsdóttir et al., 2017; Heydari, et al., 2015; Lee et al., 2017; Nowell, et al., 2017; Stegen & Wankier, 2018)

2.7 Theoretical Framework

The theoretical framework that underlies the theoretical underpinnings of this study is Benner's (1982) novice to expert theory. Benner's (1982) novice to expert theory was primarily developed to describe how nurses advance in skill and knowledge acquisition over years of professional nursing experience. The theory discusses the performance characteristics of the five proficiency levels that one faces once he or she transitions to a new role, these levels of proficiency are a novice, advanced beginner, competent, proficient, and expert, respectively.

The first level of Benner's novice to expert theory is the novice level. In this level, the beginners have no experience of the situation in which they are expected to perform; these beginners require objective attributes that can be understood without situational expertise to guide their performance (Benner, 1984).

The next phase in Benner's novice to the expert continuum is the advanced beginner phase. "The advanced beginner is one who can demonstrate marginally acceptable performance." This person is one who has coped with enough real situations to note (or to have them pointed out by a mentor) (Benner, 1984, p. 128). Advanced beginners need help in setting priorities since they operate on general guidelines and are only beginning to perceive recurrent meaningful patterns in their clinical practice (Benner, 1984). "Nurses functioning at this level are guided by rules and are oriented by task completion; they have difficulty grasping the current patient situation in terms of larger perspective" (Alligood, 2017, p. 101).

The third phase of Benner's theory is competency. Benner (1982) defines a competent nurse as one who has two to three years of experience and can see actions in terms of long-term goals or plans. At this stage, the nurse is consciously aware of these plans; he/she can classify situations to be considered most important or can be ignored. A

competent nurse has a feeling of mastery and the ability to cope with and manage the many contingencies of clinical nursing, his or her conscious, deliberate planning helps achieve a level of efficiency and organization. Competent Nurses make simulations that give them practice in planning and coordinating multiple, complex patient care demands. The competent level is supported and reinforced institutionally (Benner, 1984).

The next phase of Benner's novice to expert theory is the proficient level. This level can be achieved by continued practice in competency level, the proficient performer can perceive situations as wholes, rather than in terms of aspects, and maxims guide performance. Through the experience the proficient level; nurse learns what typical events to expect in a given situation and how to modify plans in response to these events. The knowledge of the proficient nurse improves his or her decision making, which will be less labored. On the other hand, the competent person does not yet have enough experience to recognize a situation in terms of an overall picture or in terms of which aspects are most salient and most important. Proficient performers best learn by the use of case studies where their ability to grasp the situation is solicited and taxed (Benner, 1984).

The final phase of Benner's theory is the transition to expert. The expert performer has a tremendous experience accompanied by intuition to deal with the situations using time management strategies. The expert person can make intuitive links between the most important aspects of a case and respond appropriately (Benner, 1984).

Benner's theory of novice to expert can be applied to all aspects of nursing practice, including students of nursing, nurse educators, and advanced practice nurses. Benner suggested that nurses who are experts in one area of practice could be classified at the novice level if placed in a new field or a situation (Benner, 1984).

When an expert clinical nurse transits to a new role, he/she would be at the novice stage of skilled performance. Identification of the standard performance characteristics of the level that each novice lives will decrease the stress caused by the vague role of work. Therefore, mentoring should be available to guide the novice educator and support him/her to achieve a successful transition into the new position. Without mentoring, the novice educator may stay a more extended time at one level; therefore, his/her job satisfaction will diminish, which will increase his/her intention to leave the new role. By utilizing Benner's theory to recognize the developmental stages of the novice nurse educator, the mentor can identify the mentoring needs of the novice nursing faculty and guide him or her to transition smoothly to the next level.

Hence, Benner's (1982) theory was selected to guide this study as it provides a framework for the transition from novice to expert nursing faculty. Defining the performance characteristics of each transitional stage, in theory, can assist in recognizing the needs of novice faculty and guide the mentoring relationship.

3. Chapter Three: The Methods

The purpose of this study was to explore the perceived mentoring needs among faculty members in nursing schools in Jordan. This study further aimed to examine the differences in mentoring needs by faculty members' demographic characteristics (e.g., academic rank, type of university, years of experience and gender). Study participants were full-time nursing faculty who are holding at least a Master's degree in nursing science and were teaching at a four-year nursing school at the time of data collection. A cross-sectional survey research design was utilized to collect data for this study.

3.1 Research Design

A cross-sectional survey design was utilized to address the problem and answer the research questions of this study. Cross-Sectional survey design is beneficial for describing the phenomena at a fixed point of time, relatively quick, convenient, and inexpensive; It is particularly suitable for estimating the prevalence of behavior in a population and sometimes can be repeated at different times to assess trends over time (Grove & Gray, 2018; Sedgwick, 2014).

3.2 Research Site and Participants

Recruitment of the participants took place at the public and private universities in Jordan that have a four-year nursing program accredited by Jordan Accreditation and Quality Assurance Commission for Higher Education Institutions (HEAC). Six public and seven private universities were included. All of the included universities have a baccalaureate of science in nursing degree programs, one has a Ph.D. program, and ten have a master's degree program.

For this study, the potential eligible participants were full-time nursing faculty who were holding at least a Master's degree in nursing science and were currently

teaching at one of the 13 universities in a baccalaureate nursing program or higher. Adjunct as well as part-time faculty members were excluded from the study.

A convenience sampling technique was used to recruit participants for this study. All full-time nursing faculty who were teaching at the selected research sites were invited to participate. The required sample size was calculated via a power analysis using G*Power 3. A priori power analysis revealed that for an ANOVA test with 4 degrees of freedom and based on moderate effect size, power estimate of 80%, and alpha of 0.05, a total of 200 nursing faculty would need to be approached.

3.3 Data Collection Instrumentation

The study packet included a researcher designed a demographic datasheet and the Faculty of Nursing Mentoring Needs Assessment Instrument (Appendix A).

The Faculty of Nursing Mentoring Needs Assessment (FNMNA) instrument was initially developed by Dr. Jo-Ann Sawatzky at the College of Nursing Faculty of Health Sciences at the University of Manitoba, Canada based on a review of the related literature. The instrument was used to assess mentoring needs among full-time nursing faculty at the author's institution (Sawatzky & Enns, 2009).

The Faculty of Nursing Mentoring Needs Assessment consists of seven sections including a list of possible roles and responsibilities for mentors, characteristics of a "good mentor,", individual and faculty benefits of being a mentor, stressors for new faculty, obstacles/ deterrents to mentoring, and factors to be addressed in developing a formal mentoring program at the faculty. Faculty of Nursing Mentoring Needs Assessment showed satisfactory internal consistency reliability in the current study with a Cronbach's alpha for the seven sections that ranged from 0.81 to 0.95 and for the total questionnaire a Cronbach's alpha of 0.96.

In each of the seven sections, respondents were asked to circle the one number that comes closest to reflecting their perceptions about it using 5-point Likert scales ranging from 0 (strongly disagree) to 4 (strongly agree). Further, additional qualitative comments were encouraged at the end of each of the seven sections.

The original author granted written permission to use the instrument in this thesis. Demographic data collected from participating faculty included age, gender, highest degree, years of experience, Job title/academic rank, length of time in the current organization, and type of the organization (i.e. public academic institution vs. private academic institution).

3.4 Data Collection Procedures

Institutional Review Board (IRB) approval was obtained from the Ethics Committee at Zarqa University before commencing data collection. Once an IRB approval had been granted, the researcher met the dean of each nursing faculty to explain the study aims and procedures and seek their cooperation in distributing the questionnaires to potentially eligible participants. The researcher gave each dean copies of the study questionnaire and asked him/her to distribute them to faculty members to complete it anonymously at their convenience and return in a sealed envelope to the dean's office. The study packet included a cover letter explaining the purpose of the study, risks and benefits, assurance of keeping participants' information confidential, and contact information of the researcher. Completing the questionnaire took about 20-30 minutes. The return of completed questionnaires was considered the faculty's consent to participate. The questionnaires were coded to be easily traced without carrying any identifying information about the faculty member. The researcher had every other week visit to each of the study sites to follow on data collection progress and collect completed questionnaires. The scale was introduced to eligible participants

in its original language of English because English is the formal language of teaching and instruction in all nursing schools in Jordan. Furthermore, many faculty members in nursing schools in Jordan have earned their Ph.D. degrees from Western English-speaking countries. Data collection was completed between March 2020 and July, 2020).

3.5 Data Analysis

Data entry into the SPSS software started once data collection started; a professional specialist in data entry and statistical analysis was hired for this purpose. To assure accuracy and minimize potentials for errors and allow early identification of relevant issues, data were checked for accuracy by the researcher every week by selecting three surveys randomly. For security purposes, electronic data were stored on the researcher's personal computer, which has a security password to log in to it (known only by the researcher). A backup copy of files was kept on a separate hard disk for potential loss or damage. Electronic backups and original surveys were held in the researcher's office in a locked cabinet. Data analysis was performed using the IBM SPSS® Statistics (version 24). Descriptive statistics, including means, standard deviations, and frequency percentages, were used to describe the demographic characteristics of the study sample. For statistical purposes, the response options on the scale were changed to 1 (strongly disagree) to 5 (strongly agree). Frequencies of the response categories on the 5-point Likert scale on each of the seven sections of the instrument were calculated as well as the mean and standard deviation for each response category. Bivariate analysis (i.e., ANOVA test) were conducted to examine the relationship between perceived mentoring needs and academic and demographic characteristics of the nursing faculty (i.e.., academic rank, type of university, years of experience as a full-time nursing faculty, and gender). An alpha of 0.05 was used to

determine statistical significance. The level of importance (i.e. low, medium and high) was calculated by using the relative importance that is assigned using:

Class Interval = $\frac{maximum\ class - minmum\ class}{number\ of\ classes}$**; Class Interval =** $\frac{5-1}{3}$ **=1.33**

Items with a mean of less than 2.33 were considered having low importance, items of a mean between 2.34 and 3.66 were considered having moderate importance, and items with a mean of 3.67 and above were considered having high importance.

3.6 Ethics and Protection of Human Subjects

The proposal of the study was submitted to the Institutional Review Board at Zarqa University to have its approval before commencing data collection. All participants were above the age of 18. Before completing the questionnaire, enough time was given to participants to ask and answer any questions related to the study. Also, the investigator discussed all issues of informed consent with potential participants: the content of the questionnaire, the voluntary nature of participation, the right not to answer questions or to withdraw from the study at any time, and the confidentiality with which this information treated. The returned completed questionnaires were considered participants' consent to participate.

There was no anticipated risk to participants in the study, and no serious adverse events were anticipated. Furthermore, participants were informed that their participation would not affect their job evaluation or the enjoyed privileges in the university since their responses will not be reported or discussed with the dean of the school of nursing.

4. Chapter Four: The Results

This chapter includes description of the study sample, a summary of the survey results, and a detailed report of the descriptive data on each of the seven subscales on the Faculty of Nursing Mentoring Needs Assessment (FNMNA).This chapter will discuss answers to the six research questions of this study which aimed to explore the perceived mentoring needs among faculty members in nursing schools in Jordan and to examine differences in mentoring needs by faculty members' demographic characteristics (e.g., academic rank, type of university, years of experience, gender).

4.1 Description of the Sample

A total of 180 faculty members were approached to participate in the study and a total of 147 members agreed to participate in the study and completed the study questionnaire. Thirty-three faculty members declined to participate because they were very busy with the transition to the online teaching at the beginning of the pandemic period of COVID-19. The response rate was (147/180*100% = 82%).

As shown in table (1), the majority of the participants were females (59.2%), had a PhD as the highest academic degree (70.7%), had years of experience as a full-time nursing faculty that ranged from 10 to 14 years (29.5%), were holding an assistant professor academic rank (33.6%), and were working in a public university (71.4%).

Table 1. Academic and demographic characteristics of the study sample (n=147)

Variable	Classification	Frequency	Percent
Gender	Male	60	40.8
	Female	87	59.2
Highest degree	MSN	33	22.4
	DNP	2	1.4
	Ed.D/PhD	104	70.7
	Master degree in field other than nursing	8	5.4

Variable	Classification	Frequency	Percent
Years of experience as a full-time nursing faculty	0 – 4	29	19.9
	5 – 9	40	27.4
	10 – 14	43	29.5
	15 or greater	34	23.3
Job title/academic rank	Associate Professor	44	30.8
	Clinical Instructor	13	9.1
	Assistant Professor	48	33.6
	Instructor	29	20.3
	Professor	9	6.3
Type of the organization	Public	105	71.4
	Private	42	28.6
Are you currently, or have you ever been in a mentoring relationship within the Faculty in which you are currently working?	No	95	66
	Yes	49	34
If yes	Mentor	41	97.6
	Mentee	16	94.1

*****The percentages are based on valid cases only**

4.2 Results of the study questions

1- What roles/responsibilities of mentors are important to Jordanian nursing faculty?

To answer this question, we computed the mean and standard deviation for each item in the first section of the FNMNA. As shown in table (2), all item scores ranged between 3.69 and 4.49 indicating that Jordanian nursing faculty highly value all of the listed roles/responsibilities of mentors. Roles and responsibilities of mentors that were perceived to be most valuable/helpful to Jordanian nursing faculty were provide inspiration (mean= 4.49, SD ± 0.79) followed by provide honest feedback on performance (mean = 4.41, SD ± 0.79), and provide information (mean = 4.40, SD ± 0.81). Items that were perceived to be of least importance to Jordanian nursing faculty included: be a friend (mean = 3.69, SD ± 1.04), help build social networks (mean = 3.80, SD ± 0.99), and review grant proposals (mean = 3.96, SD ± 0.89).

Table 2. Rank order of roles of mentors important to Jordanian nursing faculty

Rank order	Statement	Mean (SD±)
1	Provide inspiration	4.49 (0.79)
2	Provide honest feedback on performance	4.41 (0.79)
3	Provide information	4.40 (0.81)
4	Be a positive role model	4.36 (0.82)
5	Clarify the culture of the university	4.24 (0.72)
6	Support/encourage during stressful times	4.21 (0.81)
7	Help establish career goals	4.17 (0.74)
8	Help locate suitable resources	4.17 (0.78)
9	Share resources	4.17 (0.77)
10	Provide insight into administrative responsibilities	4.16 (0.69)
11	Help reduce the sense of isolation	4.12 (0.75)
12	Help establish ways to balance work & personal life	4.02 (0.91)
13	Review grant proposals	3.96 (0.89)
14	Help build social networks	3.80 (0.99)
15	Be a friend	3.69 (1.04)
	Total	**4.16 (0.59)**

2- What Characteristics of a Good Mentor Important to Jordanian Nursing Faculty?

To answer this question, we computed the mean and standard deviation for each item in the characteristics of a good mentor section in the FNMNA. As shown in table (3), characteristics of a good mentor perceived to be of highest importance to Jordanian nursing faculty included respectful (mean = 4.47, SD ± 0.71), positive attitude; enthusiasm (mean = 4.43, SD ± 0.63), caring (mean = 4.41, SD ± 0.79), and trustworthiness (mean = 4.40, SD ± 0.79). Conversely, characteristics of mentors perceived to be of least importance to Jordanian nursing faculty included similar personality to mentee (mean = 3.67, SD ± 1.18), similar teaching philosophy (mean = 3.92, SD ± 0.88), and expertise in similar content area (mean = 3.96, SD ± 0.83).

Table 3. Rank order of a good mentor's characteristics important to nursing faculty

Rank Order	Statement	Mean (SD±)
1	Respectful	4.47 (0.71)
2	Positive attitude; enthusiasm	4.43 (0.63)
3	Caring	4.41 (0.79)
4	Trustworthiness	4.40 (0.79)
5	Honesty	4.39 (0.81)
6	Experience in teaching	4.38 (0.64)
7	Visionary qualities	4.34 (0.66)
8	Excellent interpersonal skills	4.32 (0.82)
9	knowledge of the university environment	4.28 (0.78)
10	Experience in research	4.25 (0.82)
11	Insight regarding coping	4.23 (0.84)
12	Non-judgmental	4.21 (0.84)
13	Networking ties in mentees area	4.14 (0.79)
14	Tenured	4.09 (0.82)
15	Ability to explain mysteries/unknowns	4.01 (0.85)
16	Expertise in similar content area	3.96 (0.83)
17	Similar teaching philosophy	3.92 (0.88)
18	Similar personality to mentee	3.67 (1.18)
	Total	**4.25 (0.57)**

3- What are the perceived personal and faculty's benefits of being a mentor among Jordanian nursing faculty?

To answer this question, we computed the mean and standard deviation for each item in perceived personal benefits of being a mentor section in the FNMNA. As shown in Table (4), Jordanian nursing faculty in this study had a high response value for all items. Foster career advancement (mean = 4.33, SD ± 0.55), contributes to personal/professional self (mean = 4.31, SD ± 0.61), and enhanced self-esteem (mean =

4.27, SD ± 0.64) were regarded by Jordanian nursing faculty as the most important benefits of being a mentor. On the other hand, rewarding to share insight (mean = 4.23, SD ± 0.70) followed by renewed energy/enthusiasm (mean = 4.23, SD ± 0.59) and exposure to fresh/new ideas (mean = 4.23, SD ± 0.66) were regarded as relatively less important to Jordanian nursing faculty.

Table 4. Rank order of perceived personal benefits of being a mentor among Jordanian nursing faculty

Rank Order	Statement	Mean (SD±)
1	Fosters career advancement	4.34 (0.55)
2	Contributes to personal/professional self	4.31 (0.61)
3	Enhanced self-esteem	4.27 (0.64)
4	Exposure to fresh/new ideas	4.23 (0.66)
5	Renewed energy/enthusiasm	4.23 (0.59)
6	Rewarding to share insight	4.23 (0.70)
	Total	**4.27 (0.50)**

4- What are the perceived stressors for new faculty among Jordanian nursing faculty?

To answer this question, we computed the mean and standard deviation for each item in perceived stressors for new faculty section in the FNMNA. Inadequate information regarding the informal/unspoken rules (mean = 3.97, SD ± 0.85) and inadequate information regarding the university environment (mean = 3.85, SD ± 0.76) were the two items perceived to be most stressful whereas inadequate knowledge regarding the research process (mean = 3.51, SD ± 0.85) was perceived to be the least stressful for new Jordanian nursing faculty Table (5).

Table 5. Rank Order of perceived stressors for new faculty among nursing faculty

Rank Order	Statement	Mean (SD±)
1	Inadequate information regarding the informal/unspoken rules	3.97 (0.85)
2	Inadequate information regarding the university environment	3.85 (0.76)
3	Inadequate knowledge regarding the teaching role	3.83 (0.83)
4	Lack of peer support	3.82 (0.81)
5	Inadequate knowledge regarding the research process	3.51 (0.85)
	Total	**3.80 (0.61)**

5- What are the possible benefits of mentoring to the faculty of nursing?

Fostering goals of the Faculty (mean = 4.26, SD ± 0.73) and improved overall performance of the Faculty (mean = 4.24, SD ± 0.70) were perceived by Jordanian nursing faculty to be the mentoring benefits of highest importance to the Faculty of Nursing. Decreased attrition (mean = 3.95, SD ± 0.85) was perceived to be the least important benefit of mentoring to the Faculty of Nursing by involved Jordanian nursing faculty, Table (6).

Table 6. Rank order of the possible benefits of mentoring to the Faculty of Nursing

Rank Order	Statement	Mean (SD±)
1	Fostering goals of the Faculty	4.26 (0.73)
2	Improved overall performance of the Faculty	4.24 (0.70)
3	Team building	4.18 (0.74)
4	Increased research productivity	4.17 (0.74)
5	Increased collegiality	4.15 (0.75)
6	Increased teaching skills	4.15 (0.74)
7	Development of Faculty capacity	4.12 (0.75)
8	Increased job satisfaction	4.10 (0.78)
9	Preservation of Faculty culture	4.05 (0.74)
10	Decreased attrition	3.95 (0.85)
	Total	**4.10 (0.63)**

4.3 Perceived Obstacles/deterrents to Mentoring

As shown in Table (7), lack of supportive infrastructure (mean = 4.25, SD ± 0.77) and lack of recognition/ compensation for the role (mean = 4.07, SD ± 0.83) were perceived as the most significant obstacles/deterrents to mentoring whereas lack of time to fulfill the role effectively (mean = 3.96, SD ± 0.71) was perceived to be the least significant obstacle/deterrent to mentoring by Jordanian nursing faculty.

Table 7. Rank order of possible obstacles/deterrents to mentoring

Rank Order	Statement	Mean (SD±)
1	Lack of supportive infrastructure	4.25 (0.77)
2	Lack of recognition/ compensation for the role	4.07 (0.83)
3	Lack of mentoring resources/ materials	4.00 (0.84)
4	Inadequate preparation for the role	4.00 (0.87)
5	Lack of time to fulfill the role effectively	3.96 (0.71)
	Total	**4.05 (0.70)**

4.4 Factors of Formal Mentoring Program

Orientation program for mentors (mean = 4.40, SD ± 0.89) and ongoing professional development for mentors (mean = 4.36, SD ± 0.90) were the two aspects cited as most important to be included in a formal/structured mentoring program by participating faculty whereas formal evaluation procedures was the aspect perceived as the least important to be included in a formal/structured mentoring program (mean = 4.08, SD ± 0.96), Table (8).

Table 8. Rank order of factors to be included in a formal/structured mentoring program

Rank Order	Statement	Mean (SD±)
1	Orientation program for mentors	4.40 (0.89)
2	Ongoing professional development for mentors	4.36 (0.90)
3	Designated coordinator for the program	4.28 (0.74)
4	Formal recognition of the mentoring role (i.e. release time)	4.23 (0.86)
5	Voluntary participation as mentors	4.19 (0.79)
6	Formal evaluation procedures	4.08 (0.96)
	Total	**4.26 (0.68)**

4.5 Differences in Perceived Mentoring Needs by Demographic Characteristics of the Faculty Members.

To examine the effects of the four academic and demographic variables (i.e. academic rank, years of experience as a full-time nursing faculty, gender and type of university) on faculty's perceived mentoring needs, One-Way Analysis of Variance (ANOVA) was performed.

Academic rank. The ANOVA test results as shown in Table 9 showed no statistically significant differences in faculty's members' perceived mentoring needs by their academic rank.

Table 9. One-Way Analysis of Variance of faculty's perceived mentoring needs by academic rank

Factor	Academic rank	N	M (SD±)	F	P value
Possible roles/responsibilities for mentors	Associate professor	43	4.15 (.54)	.56	.68
	Clinical instructor	13	4.37 (.49)		
	Assistant professor	48	4.13 (.58)		
	Instructor	29	4.11 (.73)		
	Professor	9	4.17 (.59)		
Possible characteristics of a good mentor	Associate professor	44	4.25 (.60)	.55	.69
	Clinical instructor	13	4.4 (.40)		
	Assistant professor	48	4.21 (.50)		
	Instructor	29	4.14 (.74)		
	Professor	9	4.35 (.46)		
Possible personal benefits of being a mentor	Associate professor	44	4.23 (.42)	.36	.83
	Clinical instructor	13	4.33 (.57)		
	Assistant professor	48	4.21 (.57)		
	Instructor	29	4.31 (.50)		
	Professor	9	4.35 (.39)		
Possible stressors for new faculty	Associate professor	44	3.75 (.54)	1.67	.16
	Clinical instructor	13	4.06 (.64)		
	Assistant professor	48	3.70 (.69)		
	Instructor	29	3.99 (.59)		
	Professor	9	3.71 (.43)		
Possible benefits of mentoring to the Faculty of Nursing	Associate professor	43	4.13 (.56)	.61	.65
	Clinical instructor	13	4.19 (.63)		
	Assistant professor	46	4.09 (.71)		
	Instructor	29	3.96 (.66)		
	Professor	9	4.27 (.40)		
Possible obstacles/deterrents to mentoring	Associate professor	43	3.89 (.71)	1.24	.29
	Clinical instructor	13	4.23 (.92)		
	Assistant professor	46	4.06 (.73)		
	Instructor	29	4.17 (.59)		
	Professor	9	4.28 (.57)		
Factors to be included in a formal/structured mentoring program	Associate professor	44	4.27 (.65)	.42	.78
	Clinical instructor	13	4.32 (.80)		
	Assistant professor	48	4.21 (.75)		
	Instructor	29	4.30 (.50)		
	Professor	9	3.98 (.92)		

Years of experience. The ANOVA test results as shown in Table 10 showed that there was only a statistically significant difference in factors to be included in a formal/structured mentoring program by faculty's years of experience as a full-time nursing faculty. Tukey Post hoc analysis revealed that faculty members with 0-4 years of experience as a full-time nursing faculty in current institution perceived items to be included in a formal/structured mentoring program to be of more importance compared to faculty members with more years of experience as full-time faculty.

Table 10. One-Way Analysis of Variance of faculty's perceived mentoring needs by years of experience as a full-time nursing faculty.

Factor	Years of experience	N	M(SD)	F	P value
Possible roles/responsibilities for mentors	0 – 4	29	4.11 (.70)	.18	.90
	5 – 9	40	4.41 (.64)		
	10 – 14	42	4.21 (.60)		
	15 or greater	34	4.15 (.41)		
Possible characteristics of a good mentor	0 – 4	29	4.41 (.52)	1.6	.188
	5 – 9	40	4.14 (.56)		
	10 – 14	43	4.31 (.63)		
	15 or greater	34	4.16 (.53)		
Possible benefits of being a mentor	0 – 4	29	4.42 (.55)	1.75	.15
	5 – 9	40	4.31 (.50)		
	10 – 14	43	4.23 (.54)		
	15 or greater	34	4.14 (.39)		
Possible stressors for new faculty	0 – 4	29	3.71 (.59)	1.65	.18
	5 – 9	40	3.90 (.59)		
	10 – 14	43	3.67 (.65)		
	15 or greater	34	3.93 (.60)		
Possible benefits of mentoring to the Faculty of Nursing	0 – 4	29	4.27 (.69)	1.14	.35
	5 – 9	40	4.01 (.62)		
	10 – 14	42	4.11 (.73)		
	15 or greater	32	4.05 (.41)		
Possible obstacles/deterrents to mentoring	0 – 4	29	4.08 (.85)	.19	.90
	5 – 9	40	3.99 (.72)		
	10 – 14	42	4.05 (.72)		
	15 or greater	32	4.11 (.51)		
Factors to be included in a formal/structured mentoring program	0 – 4	29	4.46 (.43)	2.57	.05
	5 – 9	40	4.14 (.64)		
	10 – 14	43	4.36 (.72)		
	15 or greater	34	4.06 (.81)		

Gender. The ANOVA test results as shown in Table (11) showed that there was only a statistically significant difference in factors to be included in a formal/structured mentoring program by faculty's gender. Female faculty members perceived items to be included in a formal/structured mentoring program to be of more importance compared to male faculty members.

Table 11. One-Way Analysis of Variance of faculty's perceived mentoring needs by gender.

Factor	Gender	N	M(SD)	F	P value
Possible roles/responsibilities for mentors	Male	59	4.06 (.66)	2.57	.11
	Female	87	4.22 (.53)		
Possible characteristics of a good mentor	Male	60	4.24 (.60)	.005	.94
	Female	87	4.25 (.56)		
Possible benefits of being a mentor	Male	60	4.20 (.55)	1.90	.17
	Female	87	4.31 (.46)		
Possible stressors for new faculty	Male	60	3.72 (.65)	1.56	.21
	Female	87	3.85 (.58)		
Possible benefits of mentoring to the Faculty of Nursing	Male	60	4.08 (.68)	.11	.73
	Female	84	4.12 (.59)		
Possible obstacles/deterrents to mentoring	Male	60	3.95 (.71)	2.20	.14
	Female	84	4.13 (.69)		
Factors to be included in a formal/structured mentoring program	Male	60	4.13 (.77)	3.70	.05
	Female	87	4.35 (.61)		

Type of university. The ANOVA test results as shown in Table (12) showed that there was only a statistically significant difference in possible benefits of being a mentor by type of university (i.e. private vs. public). Faculty members working in private universities perceived more benefits of being a mentor compared to faculty members working in public universities.

Table 12. One-Way Analysis of Variance of faculty's perceived mentoring needs by type of university.

Factor	Type of University	N	M(SD)	F	P value
Possible roles/responsibilities for mentors	Public	105	4.16 (.63)	.01	.91
	Private	41	4.17 (.47)		
Possible characteristics of a good mentor	Public	105	4.23 (.95)	.24	.62
	Private	42	4.28 (.52)		
Possible benefits of being a mentor	Public	105	4.22 (.51)	3.61	.05
	Private	42	4.39 (.47)		
Possible stressors for new faculty	Public	105	3.78 (.57)	.34	.55
	Private	42	3.84 (.72)		
Possible benefits of mentoring to the Faculty of Nursing	Public	105	4.06 (.63)	1.60	.20
	Private	39	4.21 (.61)		
Possible obstacles/deterrents to mentoring	Public	105	4.04 (.71)	.15	.69
	Private	39	4.09 (.69)		
Factors to be included in a formal/structured mentoring program	Public	105	4.24 (.65)	.16	.68
	Private	42	4.29 (.76)		

5. Chapter Five: Discussion of the Results

5. Introduction

In an effort to gain an understanding of the perceived mentoring needs among faculty members in nursing schools in Jordan and to examine differences in mentoring needs by faculty members' demographic and work characteristics (e.g., academic rank, type of university, years of experience, gender) a cross sectional survey research study was conducted. A convenience sample of 147 full-time faculty who had a minimum of a Master's degree was recruited from thirteen colleges of nursing in Jordan that had a baccalaureate degree nursing program or higher. Nursing faculty were surveyed using the Faculty of Nursing Mentoring Needs Assessment (FNMNA). Faculty demographics and work variables including age, gender, highest degree, years of experience, years as a full-time faculty member in current institution, type of academic institution (i.e. public vs. private), and academic rank were also collected.

In the following sections, an interpretation of study results, a comparison with the relevant international literature, study limitations, and recommendations for nursing education and future research will be provided.

5.2 Discussion of the Study Questions

1- What roles/responsibilities of mentors are important to Jordanian nursing faculty?

Though Jordanian nursing faculty identified all of the roles and responsibilities of the mentor as being important (i.e. all items had a mean score of ≥ 3.7), the top 6 items perceived to be of highest importance to them (i.e. had highest scores) were: provide inspiration, provide honest feedback on performance, provide information, be a positive role model, clarify the culture of the university, and support/encourage during stressful times. This result is in part consistent with those reported by (Sawatzky & Enns, 2009) who also used the Nursing Mentoring Needs Assessment (FNMNA) to survey nursing

faculty in their study. That's, provide information, be a positive role model, and support/encourage during stressful times were also among the roles perceived to be highest importance by nursing faculty in Sawatzky & Enns (2009) study. This result is also consistent with those among faculty members in other specialties. For instance, faculty members from different health and non-health disciplines cited guidance and support, mutual respect and trust, knowledge exchange, and help navigating the institution as the most important roles that a mentor can perform (Eller, et al., 2014; Nottingham, et al., 2017). These results indicate that these shared roles and responsibilities of mentors are essential and have to be considered in the future development and evaluation of formal mentoring programs.

2- What characteristics of a good mentor are important to Jordanian nursing faculty?

Characteristics of a good mentor perceived to be of highest importance to Jordanian nursing faculty were related to both the career function and the psychosocial function and included: trustworthiness, respectful, positive attitude, enthusiasm, caring, honesty, and experience in teaching. Characteristics of a good mentor as perceived by Jordanian nursing faculty are in agreement with the characteristics of a good mentor as perceived by faculty members from nursing as well as other disciplines in higher education reported in previous studies (Sawatzky, & Enns, 2009; Bailey, et al., 2016; Eller et al., 2014; Straus, et al., 2013).

Further, characteristics of a good mentor perceived by Jordanian nursing faculty concur with characteristics of a good mentor perceived by student teachers reported by (Heeralal, 2014) who reported that student teachers prefer mentor teachers who are knowledgeable, experienced, honest, and respectful. Hence, characteristics of a good mentor reported in this study and previous research have to be taken into account in the selection of formal mentors as well as in the training and evaluation of formal mentors.

The three characteristics of a good mentor perceived to be of least importance (i.e. had the lowest mean scores) to Jordanian nursing faculty included expertise in similar content area, similar teaching philosophy, and similar personality to mentee. A plausible explanation for the low ranking of these items by the participants could be that Jordanian nursing faculty value more instrumental and academic mentoring to help them advance in their academic and research careers regardless of the differences or similarities in traits, philosophies, or personalities between them and the mentor.

3- What are the perceived personal and faculty's benefits of mentoring among Jordanian nursing faculty?

Jordanian nursing faculty ranked all of the personal benefits of mentoring included in the study questionnaire as important (i.e. all had mean scores of 4.20 and above). But foster career advancement and contributes to personal/professional-self were perceived as the most important benefits of being a mentor by the participants (i.e. had the highest mean scores among all items). This finding is consistent with findings of (Kalpazidou, et al., 2016) who reported that professional development was one of the most important benefits of being a mentor perceived by early career female researchers who were involved in a pilot mentoring program. Further, results of this study are in agreement with prior qualitative research findings among Jordanian nursing faculty in which postdoctoral mentoring was cited as essential to supporting postdoctoral research activity/career of nursing faculty (Al-Nawafleh, et al., 2013). Our finding is however discordant with Sawatzky & Enns (2009) findings among Canadian nursing faculty who gave the lowest ranking to career advancement as a personal benefit of being a mentor and the highest to rewarding to share insight. This difference could be explained by the differences in sample characteristics between our study and that of Sawatzky & Enns (2009). For example, about 60% of Jordanian nursing faculty in this study were early

career faculty members (i.e. at the assistant professor rank or lower) and thus their needs for mentoring and guidance are different from the participants in Sawatzky&Enns (2009) study of whom the majority were tenured or a tenure track faculty.

Finally, perceived benefits of mentoring to the faculty of nursing overall by the participants in this study are in agreement with those reported in other surveys (Cross et al., 2019; Sawatzky & Enns, 2009) as well as experimental studies (Efstathiou et al., 2018; Mylona et al., 2016) including improving the performance of the faculty, collegiality, increased research productivity, team building, and improved job satisfaction.

4-What are the perceived stressors for new faculty among Jordanian nursing faculty?

Inadequate information regarding the informal/unspoken rules, inadequate information regarding the university environment, and inadequate knowledge regarding the teaching role were the three top rated stressors for new faculty cited by the study participants. The top-rated stressors for new Jordanian nursing faculty in this study are in agreement with those reported among novice nursing faculty in other studies. For instance, Canadian nursing faculty also rated inadequate information regarding the informal/unspoken rules as one of the significant stressors for new faculty (Sawatzky & Enns, 2009). Inadequate information about the teaching role was also cited as a significant stressor for novice/new nurse faculty in several studies. This finding is not surprising given that most PhD programs in nursing focused on the research process and thus the graduation of nurse scientists not nurse educators. Therefore, new nursing faculty mostly transition from clinical practice into the academic environment with limited or no prior preparation or teaching experience. These results further highlight the importance of orientation or structured mentoring programs in easing new nurse

faculty transition into the academic environment and getting them accustomed to the new teaching role.

Consistent with results of Sawatzky & Enns (2009), inadequate knowledge about the research process had the lowest mean score of all stressors for new nursing faculty. As we alluded to this earlier, this finding is expected given the extensive research preparation that nursing faculty have during their graduate studies especially during PhD studies (Brown & Sorrell, 2017; Jane, et al. 2015; Jetha, et al., 2016).

5- What are the perceived obstacles/deterrents to mentoring among Jordanian nursing faculty?

Study participants rated all listed obstacles/deterrents to mentoring as significant (i.e. had mean scores of 3.65 or above) with lack of supportive infrastructures the top rated significant obstacle/deterrent which is concordant with results among Canadian nursing faculty (Sawatzky & Enns, 2009). Further, other items listed in the study questionnaire which were perceived by Jordanian nursing faculty as significant obstacles to mentoring (e.g., lack of time to fulfill the role, lack of mentoring resources) are consistent with barriers to mentoring reported in several relevant studies (Bean, et al., 2014; Hayes & Koro-Ljungberg, 2011; Lau, et al., 2018; Sheridan, et al., 2015). All of the five listed obstacles to mentoring listed in the questionnaire are organizational factors. Thus, these results signify the importance of the organizational support to mentoring by acknowledging the importance of mentorship, integrate formal mentoring within the culture of the organization, overcome potential barriers to mentoring (e.g., consider mentoring as part of the workload of the faculty member, reduce faculty teaching load…etc.).

6- Are there any differences in perceived mentoring needs among Jordanian nursing faculty by their demographic characteristics (i.e. academic rank, years of experience, gender, type of university)?

Results of the bivariate analysis showed that faculty members with 0-4 years of experience as a full-time nursing faculty in current institution perceived items to be included in a formal/structured mentoring program to be of more importance compared to faculty members with more years of experience as full-time faculty. This result could be interpreted in light of Benner's novice to expert theory in that individuals who are at the novice level with no prior experience in the new role (i.e. novice faculty) would have more guiding and mentoring needs compared to more senior or competent faculty members and thus they value all the items to be included in a formal/structured mentoring program as highly important. This result is in agreement with other studies that reported novice faculty members to have more mentoring needs compared to experienced faculty members (Webber, et al., 2020). Further, faculty members working in private universities perceived more benefits of being a mentor compared to faculty members working in public universities. This finding could be explained by the differences in the retention and promotion procedures between public and private universities in the country. For instance, faculty members in public universities become tenured once they pass the probation period whereas faculty members in private universities usually never get tenured (i.e. they are appointed by a contract). Thus, faculty members in public universities may not value personal benefits of mentoring the same way faculty members in private universities do.

5.3 Study Strengths and Limitations

This study has a number of strengths, including the high response rate (i.e. 82%), the firm methodology used for data analysis, and the recruitment of a large

heterogeneous sample in regard to type of academic institution, gender, academic preparation, years of experience, and academic rank.

Despite its strengths, results of this study are however subject to several limitations. First, the study utilized a cross-sectional survey design and a convenience sampling technique which would limit the generalizability of the study findings and the generation of any causal inferences. Second, our results are subject to self-report bias as we collected data via a self-administered questionnaire. Third, study participants included full time nursing faculty only and the majority of those were recruited from public universities (i.e. 71.4%) and mostly from universities located in Central and Northern regions of the country, few faculty members were recruited from universities located in Southern region of the country which would further limit the generalizability of the study results. Finally, although the Faculty of Nursing Mentoring Needs Assessment displayed high level of internal consistency in this study, it lacks assessment of validity including content and construct—related validity.

5.4 Conclusions

Up to our knowledge, the current study is the first study that assessed perceived mentoring needs among nursing faculty members in the Jordanian universities. This study has demonstrated that the overwhelming majority of Jordanian nursing faculty highly valued mentoring and benefits of mentoring to themselves and the faculty of nursing, however, they perceived a lack of mentoring experiences. Only few Jordanian nursing faculty had a prior mentoring experience either as a mentor or a mentee in their current institutions. This study has also revealed that Jordanian nursing faculty perceived a marked lack of institutional support for mentoring relationships as they rated all listed organizational barriers to mentoring as significant. This study has further revealed that new nursing faculty members in Jordanian universities face several

challenges especially in regards to the institutional environment and the teaching role which further highlights the need for the development and implementation of formal mentoring programs to help new faculty members overcome those challenges and advance in their academic career.

5.5 Recommendations for Further Research

Several recommendations for future research emerged from the results of this study. First, to reduce sampling errors and support generalizability of the results, future studies should include a stratified random sample of Jordanian nursing faculty from public and private universities. Second, future research should focus on the needs and perceptions of new or novice nursing faculty (i.e. less than 5 years of teaching experience) as novice faculty are in most need for guidance and support given that they are new to the academic role. Thus, the insight of new faculty members would be unique and valuable to the development of mentoring programs. Third, to gain a deeper insight of faculty members' perceptions of mentoring needs, future research should utilize qualitative methodology. This study revealed the tremendous need and support for mentoring among nursing faculty members in Jordanian universities, thus, a final opportunity for future research would be to conduct a research study that aims to design, implement, and evaluate a formal mentoring program at the schools of nursing in Jordan.

5.6 Recommendations for Practice and Organizations

The findings of the current study have significant implications for nursing education and practice. These mentoring needs assessment has provided evidence that Jordanian nursing faculty are in support of mentoring and consider it as highly beneficial both to them and the institution. Thus, formal orientation and mentoring programs should be initiated in nursing schools in Jordan to enhance the transition of new faculty into the new academic role and to help them develop teaching competence,

acclimate into the institutional environment, and achieve their career goals. Nursing faculty administrators (e.g. deans of nursing schools) have to employ strategies to overcome organizational barriers to mentoring and ensure successful implementation of mentoring programs which may include reduction of teaching load and/or assigning a workload credit for the mentoring role, formal recognition of the mentors, and ongoing evaluation of the mentoring programs. Further, results of this study should inform the development and implementation of formal mentoring programs including choosing mentors to the program, developing mentoring plans, and evaluating the effectiveness of the program. Finally, one of the top cited challenges to new nursing faculty in this study was the inadequate information about the teaching role, thus, nursing graduate programs should include pedagogical courses designed to adequately prepare prospective nurse educators to teaching role (e.g., teaching and learning theories, curriculum and examination development…etc.). Also, post-doctoral fellowships with a teaching focus could be utilized to enhance the teaching competence of new doctoral graduates from nursing schools.

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Appendices

Appendix A

Questionnaire of the Study

Research Questionnaire Cover Page and Consent form:

Investigator: The following questionnaire is part of a research project being conducted by Muath Nawafleh, master student, Faculty of Nursing, Zarqa University. I will be glad to answer any questions about the procedures of this study. I can be contacted at the following email address: muath.nawafleh@yahoo.com

Purpose: The purpose of this study is to explore the perceived mentoring needs among faculty members in nursing schools in Jordan. The study further aims to examine the differences in mentoring needs by faculty members demographic characteristics (e.g., academic rank, type of university, years of experience, gender).

Design: The research questionnaire that you are being asked to complete is attached to this consent form and contains seven brief sections on seven printed pages. The questionnaire will probably take between twenty and thirty minutes to complete. Please read instructions carefully and answer all questions clearly and completely. Your participation in this study is entirely voluntary. You may refuse to answer individual questions and you may discontinue all participation in this study at any time. Returning the completed questionnaire will serve as your consent to participate in this study.

Confidentiality: The data collected in this research study will be kept strictly anonymous. Your name will not be stored with the data, and this consent form will be stored separately from your data. Reports of this study will not include individual data in any form by which you could be identified.

This Consent Document was Reviewed and Approved by The Ethics Committee at the Faculty of Nursing, Zarqa University.

If you have questions regarding this study or its procedures or if you have any concerns please contact me (Muath Nawafleh), on my mobile number 0777193199.

If you need to ask anything related to your rights as a participant in this research please contact the Ethics Committee at the Faculty of Nursing, Zarqa University (053821100-ext 1777)

Part A. Demographic information

Please provide some details about yourself:

1. Age in years.....

2. Gender (please circle one):

○ Male ○ Female

3. Your highest degree (please circle one)?

○ MSN ○ DN ○ Ed. D/ph. D ○ Master degree in field other than nursing

4. Years of experience as a full-time nursing faculty (please circle one)?

○ 0-4 ○ 5-9 ○ 10-14 ○ 15 or greater

5. Job title/academic rank ----------

6. Length of time in the current organization ----------

7. Type of the organization:

○ Public ○ Private

8. Are you currently, or have you ever been in a mentoring relationship within the Faculty in which you are currently working? Please check the most appropriate response).

○ No ○ Yes

If yes, please indicate, are/were you?

○ The mentor ○ The mentee

Part B: Faculty of Nursing Mentoring Needs Assessment

PLEASE ANSWER EACH OF THE FOLLOWING QUESTIONS. THERE ARE NO RIGHT OR WRONG ANSWERS

1. The following is a list of possible roles/responsibilities for mentors elicited from the literature. For each item, please complete the sentence below and circle the **most appropriate** response. It would be valuable/helpful for new faculty to have a mentor who would...

Statement	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
a. be a positive role model.....	0	1	2	3	4
b. be a friend.....	0	1	2	3	4
c. provides honest feedback on performance	0	1	2	3	4
d. provides information	0	1	2	3	4
e. provide inspiration.....	0	1	2	3	4
f. help establish career goals	0	1	2	3	4
g. help establish ways to balance work & personal life	0	1	2	3	4
h. review grant proposals	0	1	2	3	4
i. provide insight into administrative responsibilities...	0	1	2	3	4
j. clarifies the culture of the university.....	0	1	2	3	4
k. help build social networks.....	0	1	2	3	4
l. help locate suitable resources.....	0	1	2	3	4
m. support/encourage during stressful times.....	0	1	2	3	4
n. help reduce the sense of isolation.....	0	1	2	3	4
o. share resources	0	1	2	3	4

Additional roles/responsibilities of mentors that you believe are important? Please include here:

1._____

2._____

3. _____

2. From the following list of possible characteristics of a >good mentor= elicited from the literature, please indicate how important you believe these personal attributes to be in a mentor. Please circle the **most appropriate** response for each characteristic.

Statement	Not at all important				Very important
a. experience in teaching	0	1	2	3	4
b. experience in research.....	0	1	2	3	4
c. respectful.....	0	1	2	3	4
d. tenured	0	1	2	3	4
e. honesty	0	1	2	3	4
f. trustworthiness.....	0	1	2	3	4
g. similar personality to mentee.....	0	1	2	3	4
h. knowledge of the university environment	0	1	2	3	4
i. caring	0	1	2	3	4
j. excellent interpersonal skills.....	0	1	2	3	4
k. networking ties in mentee=s area	0	1	2	3	4
l. insight regarding coping	0	1	2	3	4
m. non- judgmental	0	1	2	3	4
n. ability to explain mysteries/unknowns ...	0	1	2	3	4
o. expertise in similar content area	0	1	2	3	4
p. similar teaching philosophy.....	0	1	2	3	4
q. positive attitude; enthusiasm.....	0	1	2	3	4
r. visionary qualities.....	0	1	2	3	4

Additional characteristics of a good mentor that you believe are important? Please add here:

1._____

2._____

3. _____

3. From the following list of possible benefits of being a mentor elicited from the literature, please indicate how important these factors are, or would be to you, if you are to be a mentor for new faculty. Please circle the **most appropriate** response.

Statement	Not at all important				Very important
a. contributes to personal/professional self....	0	1	2	3	4
b. exposure to fresh/new ideas.....	0	1	2	3	4
c. renewed energy/enthusiasm	0	1	2	3	4
d. rewarding to share insight.....	0	1	2	3	4
e. fosters career advancement	0	1	2	3	4
f. enhanced self-esteem.....	0	1	2	3	4

Additional personal benefits of mentoring that you believe are important? Please add here:

1._____

2._____

3. _____

4. From the following list of possible stressors for new faculty, please indicate how stressful these factors were to you when you were first hired as a member of the Faculty of Nursing. Please circle the **most appropriate** response.

Statement	Not at all stressful				Very stressful
a. lack of peer support.....	0	1	2	3	4
b. inadequate knowledge regarding the teaching role.....	0	1	2	3	4
c. inadequate knowledge regarding the research process	0	1	2	3	4
d. inadequate information regarding the university environment	0	1	2	3	4
e. inadequate information regarding the informal/unspoken rules	0	1	2	3	4

Additional stressors for new faculty? Please add here:

1._____

2._____

5. The following is a list of possible benefits of mentoring relationships, from the broader perspective. Please indicate how important you feel that these factors are to the **Faculty of Nursing** overall. Please circle the **most appropriate** response.

Statement	Not at all important				Very important
a. increased research productivity.....	0	1	2	3	4
b. increased teaching skills	0	1	2	3	4
c. increased job satisfaction	0	1	2	3	4
d. increased collegiality	0	1	2	3	4
e. decreased attrition	0	1	2	3	4
f. team building	0	1	2	3	4
g. preservation of Faculty culture	0	1	2	3	4
h. development of Faculty capacity ...	0	1	2	3	4
i. fostering goals of the Faculty	0	1	2	3	4
j. improved overall performance of the Faculty.....	0	1	2	3	4

Additional benefits of mentoring that you believe are important for the Faculty of Nursing overall? Please add here:

1._____

6. From the following list of possible obstacles/deterrents to mentoring elicited from the literature, please indicate the significance to you, if you were considering being a mentor. Please circle the **most appropriate** response.

Statement	Not at all significant				Very significant
a. inadequate preparation for the role	0	1	2	3	4
b. lack of time to fulfill the role effectively	0	1	2	3	4
c. lack of recognition/ compensation for the role	0	1	2	3	4
d. lack of mentoring resources/ materials	0	1	2	3	4
e. lack of supportive infrastructure	0	1	2	3	4

Additional deterrents to mentoring that you believe are important? Please add here:

1._____

2._____

3. _____

7. If a formal/structured mentoring program is to established in the Faculty of Nursing, how important would it be to include/address each of the following factors?

Statement	Not at all important				Very important
a. orientation program for mentors	0	1	2	3	4
b. ongoing professional development for mentors	0	1	2	3	4
c. formal recognition of the mentoring role (ie release time)	0	1	2	3	4
d. formal evaluation procedures.....	0	1	2	3	4
e. voluntary participation as mentors ..	0	1	2	3	4
f. a designated coordinator for the program.....	0	1	2	3	4

Additional factors that you believe should be considered in the development and implementation of a formal/structured mentoring program within the Faculty? Please add here:

1. _____

Appendix B

To Facilitate the Task

Faculty of Nursing **Zarqa University**

Ethical Committee for Scientific Research Approval

Research Title:

Perceived mentoring needs among nursing faculty members in Jordan:

an exploratory study

Researcher Name: Muath Alnawafleh

The above-referenced project was reviewed by the Faculty of NursingEthical Committee for Scientific Research members and approved in accordance with the requirements of the protection of human subjects and the ethical principles related to research studies.

This approval, based on making the following determinations:

- The subjects will be provided with full information about the study purposes, risk and benefits, as well as their rights before participation.
- It should be clear for all subjects that participation is voluntary, and withdrawal is allowed at any time after the beginning of data collection.
- The subjects provide the consent before the beginning of data collection.
- The use or disclosure of personal information involves no more than minimal risk.
- Granting of using personal information will not adversely affect confidentiality of the individuals whose data will be used.
- An adequate plan to protect identifiers from improper use and disclosure is included in the research plan.
- The project plan includes written assurances that personal information will not be re-used or disclosed for other purposes.

Head of the ethical committee

Dr. Hala R. El Minyawi

Appendix C

Author's permission to use scale

Jo-Ann Sawatzky
To Muath Nawafleh
Feb 3 at 11:18 PM

Hello muath…

I am including a copy of our mentoring needs assessment questionnaire – see attached;

all we ask is that if you use it, please acknowledge it as ours in any papers or publications;

FYI – psychometrics are not available on this questionnaire

Best regards

j

Jo-Ann V. Sawatzky RN, PhD

Editor, *Canadian Journal of Cardiovascular Nursing*

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الاحتياجات التوجيهية المدركة لدى أعضاء الهيئة التدريسية في كليات التمريض الأردنية: دراسة استقصائية

إعداد

معاذ نوافله

بإشراف

د. رنا عبيدات

الملخص

خلفية الدراسة: يمكن أن تساعد برامج التوجيه المنظمة أعضاء هيئة التدريس المبتدئين في الانتقال بسهولة إلى الدور الأكاديمي الجديد وتعزيز تقدمهم الوظيفي.

هدف الدراسة: هدفت هذه الدراسة الى استكشاف احتياجات التوجيه المدركة لدى أعضاء هيئة التدريس في كليات التمريض في الأردن. كما هدفت الدراسة أيضا إلى فحص الاختلافات في احتياجات التوجيه حسب الخصائص الديموغرافية لأعضاء هيئة التدريس (الرتبة الأكاديمية، نوع الجامعة، سنوات الخبرة بدوام كامل، والجنس).

منهج الدراسة: تم تطبيق المسح المقطعي الذي يستخدم أسلوب العينة المتوفرة للإجابة على الأسئلة البحثية الخاصة بهذه الدراسة، كما تم الاستعانة بنظرية المبتدئ الى الخبير للعالمة بينر (1982) لتوجيه وتنفيذ هذه الرسالة. شارك في الدراسة ما مجموعه مئة وسبعة وأربعون عضو هيئة تدريس يعملون بدوام كامل في كليات التمريض في ثلاث عشرة جامعة حكومية وخاصة وقاموا بتعبئة استبانة الدراسة (استبانة تقييم احتياجات التوجيه لكلية التمريض).

النتائج: قيم اعضاء هيئة التدريس في كليات التمريض الأردنية تقييماً عالياً جميع مسؤوليات المرشدين ، وخصائص المرشد الجيد ، والفوائد الشخصية بأن تكون مرشداً ، والفوائد الاشراف لكلية التمريض المدرجة في مقياس الدراسة. كانت المعلومات غير الكافية المتعلقة بالقواعد غير الرسمية / غير المعلنة والمعلومات غير الكافية فيما يتعلق بالبيئة الجامعية من أهم الضغوطات على أعضاء هيئة التدريس الجدد. كان الافتقار إلى البنية التحتية الداعمة والاعتراف / التعويض عن الدور من أهم العوائق أمام التوجيه. لم تكن هناك فروق ذات دلالة إحصائية في إدراك أعضاء هيئة التدريس احتياجات التوجيه حسب رتبهم الأكاديمية. أعضاء هيئة التدريس العاملين في الجامعات الخاصة ادركوا فوائد أكثر بأن يكونوا مرشدين مقارنة بأعضاء هيئة التدريس العاملين في الجامعات الحكومية.

الاستنتاجات: الغالبية العظمى من أعضاء هيئة التدريس الأردنيين يقدرون التوجيه وفوائد الإرشاد لأنفسهم ولكلية التمريض ، ومع ذلك فإنهم يفتقروا الى الخبرات الإرشادية.

الكلمات الرئيسية: التوجيه، الارشاد، المبتدئين في كلية التمريض، الاردنيين، الدراسات الاستقصائية والاستبيانات، التعليم.