

ASSESSMENT OF BURNOUT IN NURSING CLINICAL MENTORS AT THE UNIVERSITY OF SHKODRA DURING CLINICAL PRACTICE

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ABSTRACT

Introduction: Burnout is a significant issue in healthcare, particularly among nursing professionals. Clinical mentors and nursing students are at heightened risk due to the dual pressures of clinical practice and teaching responsibilities. **Aim:** This study aims to evaluate burnout levels among clinical mentors at the University of Shkodra and identify contributing factors within the context of clinical practice. **Objectives:** The study assesses the impact of burnout on mentor performance. **Material and Methods:** This is a cross-sectional study. We used a standardized, structured, anonymous online questionnaire self-administered by clinical mentors and students. The inclusion criteria were the clinical mentors of the Faculty of Nursing of the University of Shkodra. The questionnaire was created with Microsoft Forms Office software and distributed via WhatsApp. The data were calculated through the Microsoft Office Excel 2010. The study period is November-December 2024. **Results:** Most participants were female (72%), and 56% held a bachelor's degree. Nearly half (45%) of the clinical mentors reported needing more support and resources to manage the stress of mentoring. A significant proportion (65%) viewed mentoring as an additional burden rather than an engaging experience, while 31% felt pressured to balance their mentoring responsibilities with providing adequate support to students. **Conclusions:** Clinical mentors face considerable challenges, with many requiring additional resources and support to manage stress. The perception of mentoring as a burden rather than a rewarding experience may hinder their effectiveness. Addressing these issues is essential to improve mentor well-being and enhance the quality of mentoring in clinical practice.

Key words: burnout, clinical mentors, nursing students.

INTRODUCTION

Burnout, a state of physical, emotional, and mental exhaustion, is a pervasive issue in healthcare, particularly among nursing professionals. Clinical mentors and nursing students are especially vulnerable to burnout due to the dual pressures of clinical practice and teaching responsibilities. Burnout is a syndrome characterized by emotional

exhaustion, depersonalization, and a reduced sense of personal accomplishment. This phenomenon has profound implications for both individual well-being and the quality of patient care (Maslach C., & Jackson, S. E., 1981).

Nursing students, particularly during clinical training, experience high levels of stress due to the complex demands of their roles. Nursing students who experience burnout during their education report lower levels of occupational preparedness and job satisfaction after graduation, which can affect their long-term career trajectories (Rudman A., & Gustavsson, J. P., 2012). Furthermore, studies indicate that early signs of burnout in nursing students, such as fatigue and emotional exhaustion, often begin during their clinical placements (Alhusban M. A., & Abualrub R. F., 2009).

Clinical mentors face unique challenges in balancing their responsibilities as educators and healthcare providers. Burnout among clinical mentors leads to reduced job satisfaction, negatively impacting their mentoring abilities and the quality of guidance provided to nursing students (Hodges H. F., & Massey A. T., 2015). Moreover, Cangelosi highlighted that novice nurse mentors often experience burnout due to lack of institutional support and the pressures of maintaining high educational standards while caring for patients (Cangelosi P. R., 2014).

The clinical environment itself is a significant contributor to burnout in both nursing students and mentors. Stressful clinical settings, coupled with insufficient support from colleagues and supervisors, exacerbate the risk of burnout (Watson R., et al., 2009). Additionally, nursing students working in understaffed and resource-limited environments are more prone to burnout, further emphasizing the need for systemic support (O'Leary J, et al., 2016).

Support systems within the workplace can mitigate burnout. Mentors who receive organizational support, such as training and professional development opportunities, are less likely to experience burnout (Bonneterre V., et al., 2011). Similarly, nursing students who have access to peer and faculty support experience lower levels of psychological distress, which in turn reduces burnout (Devereux J., et al., 2009).

Mental health is a critical factor in addressing burnout among clinical mentors and students. A systematic review which highlighted that psychological distress, including depression and anxiety, often precedes burnout in healthcare students, calling for early intervention strategies (Dyrbye L., 2006). Bulut further supported this, suggesting that resilience-building programs can help nursing students cope with stress and reduce burnout (Bulut H., et al., 2010).

In clinical mentoring, the relationship between mentors and students plays a crucial role in preventing burnout. Mentoring programs focusing on work-life balance and emotional regulation significantly reduce burnout (Wang Z., et al., 2019). Importance of emotional intelligence in managing stress, finding that higher emotional intelligence in both students and mentors correlates with lower burnout rates (Fealy S., et al., 2019).

Burnout is not only an individual issue but also a systemic one. Soler found that organizational factors such as leadership, staffing levels, and the work environment significantly contribute to burnout in healthcare professionals (Koelen M. A., et al., 2008). Leadership plays a pivotal role, supportive and communicative leaders can effectively reduce burnout among their teams (Mudallal R. H., et al., 2017).

The development of institutional programs that promote wellness and professional growth is essential in addressing burnout. Uses of online communities of practice for nurse preceptors, which helped reduce burnout by fostering a sense of community and shared learning (Ronsten B., et al., 2005). This approach was further supported by Salvagioni, who noted that burnout prevention requires a combination of individual coping strategies and organizational support systems (Salvagioni D. A. J., et al., 2017).

In Albania, and in particular in the city of Shkodra, there is an apparent lack of studies that address the issue of burnout among clinical mentors and medical students. While some research has been conducted analyzing the stress and job satisfaction of health professionals in the country, specific research addressing the experience of clinical mentors and the impact of the emotional and physical pressure they experience while interacting with students is limited or completely absent. Also, there is a lack of studies that analyze the complications of burnout in students facing the challenges of clinical practice in a health care system that faces limited resources and insufficient support. This study aims to fill this gap by providing a detailed overview of the level of burnout among clinical mentors and nursing students in the region of Shkodra. Initially, this study will be carried out in the Faculty of Nursing of the University of Shkodra, but in the near future we may consider conducting this study in all Universities of Albania, since in our country there is a lack of data about the level of burnout. to clinical mentors and nursing students.

MATERIAL AND METHODS

This is a cross-sectional study designed to assess the current experiences and perceptions of clinical mentors at the Faculty of Nursing, University of Shkodra, This cross-sectional design provides a snapshot of the current status of

clinical mentoring experiences, capturing a range of factors such as emotional resilience, mentor engagement, and work-life balance at a specific point in time (October-November 2024). The study involved the use of a standardized, structured, anonymous online questionnaire, which was self-administered by 36 clinical mentors that mentions 300 students during the weeks of clinical practices. The survey was administered online, with the link to the Google Forms questionnaire sent to the nurses via WhatsApp. Informed consent was obtained from all participants prior to administering the questionnaire. Nurses were invited to participate by clicking the provided link, ensuring easy and efficient access. The inclusion criteria were clinical mentors affiliated with the Faculty of Nursing of the University of Shkodra. In the introduction of the questionnaire, the purpose of the study was explained to the nurses, and it was emphasized that their data would remain anonymous and be used solely for research purposes. The collected data were analyzed using the Microsoft Office Excel 2010.

RESULTS

Demographics data of sample: Age of mentors that participated ranged from 27 to 59 years old, with a mean age of 42.4 years old, $STDEV = \pm 8.8$ years. Regarding the gender, 72% of the participants are female, and 28% are male. The majority of clinical mentors, 83%, live in urban areas. Work experience as a nurse ranged from 3 to 41 years with an average of 16.1 years, $STDEV = \pm 8.02$ years.

More than half of the clinical mentors, 56%, had a professional master's degree. The highest percentage of participants in the study, 33%, worked in Health Centers, thus in primary care. 17% worked in surgery, 14% in neurology, 11% in pediatrics, 6% in cardiology, 5% in emergency and internal medicine, and 3% of the clinical mentors worked in the infectious disease, intensive care, and obstetrics departments.

As we can see in the table 1, 64% of mentors express that they never feel emotionally and physically exhausted as a result of their commitments as clinical mentors. 70% of clinical mentors express that they never feel pressured to manage their responsibilities as mentors and to provide good support to students. (See table 1)

Table 1. The opinions of clinical mentors about the clinical practice with students.

	Never N (%)	Sometimes N (%)	Often N (%)	Allays N (%)
Q.1. I feel emotionally and physically exhausted as a result of my commitments as a clinical mentor.	23 (64%)	10 (28%)	3 (8%)	0 (0%)
Q.2. I feel under pressure to manage my responsibilities as a mentor and provide good support to students.	25 (70%)	8 (22%)	3 (8%)	0 (0%)
Q.3. I feel good when I see students progressing in their professional development.	0 (0%)	0 (0%)	5 (14%)	31 (76%)
Q.4. I feel emotionally distant from the students I mentor	25 (69%)	8 (22%)	1 (3%)	2 (6%)
Q.5. I had difficulty communicating with students because of my stress	35 (97%)	0 (0%)	1 (3%)	0 (0%)
Q.6. I have difficulty balancing my commitments as a mentor with those as a healthcare professional	29 (83%)	5 (14%)	1 (3%)	0 (0%)
Q.7. I feel like I need more support and resources to cope with the stress of mentoring	20 (55%)	11 (31%)	5 (14%)	0 (0%)
Q.8. I feel good about thinking of strategies to improve students' experience in clinical practice	1 (3%)	1 (3%)	11 (30%)	23 (64%)
Q.9. I feel like I no longer have the energy to meet the demands of mentoring	33 (92%)	2 (5%)	1 (3%)	0 (0%)
Q.10. I feel like I can't give more to the students from my side as a mentor	34 (94%)	1 (3%)	1 (3%)	0 (0%)
Q.11. I started to see students as a burden, more than as individuals with unique needs	33 (92%)	2 (5%)	1 (3%)	0 (0%)
Q.12. I no longer feel emotionally involved in my students' success	30 (83%)	2 (6%)	3 (8%)	1 (3%)
Q. 13. I feel that my mentoring helps in the professional development of students	1 (3%)	0 (0%)	7 (19%)	28 (78%)
Q.14. It makes me feel good when I see students achieve success because of my leadership	0 (0%)	0 (0%)	4 (11%)	32 (89%)
Q.15. I feel effective in mentoring and supporting the students I supervise	0 (0%)	1 (3%)	3 (8%)	32 (89%)
Q.16. I feel competent in facing the challenges that arise from my role	0 (0%)	1 (3%)	9 (25%)	26 (72%)

as a clinical mentor				
Q. 17. I seem to have started to see mentoring as a task more than an inclusive experience	12 (34%)	6 (17%)	12 (34%)	6 (17%)
Q. 18. I feel supported by my colleagues and the institution to face the challenges of mentoring	0 (0%)	5 (14%)	11 (30%)	20 (56%)
Q. 19. I have become more indifferent to the challenges that students face in practice	33 (92%)	2 (5%)	1 (3%)	0 (0%)
Q. 20. I feel that mentoring helps me improve myself professionally	0 (0%)	4 (11%)	11 (31%)	21 (58%)
Q. 21. I think about my work as a mentor even when I'm not working	1 (3%)	12 (33%)	16 (45%)	7(19%)

In this study 86% of mentors express that they always feel good when they see students making progress in their professional development and 69% of clinical mentors never feel emotionally distant from the students they guide. Also 97% of clinical mentors express that they have never had difficulties communicating with students due to their own stress and 83% of clinical mentors express that they have never had difficulty balancing their commitments as mentors with those as healthcare professionals. (See table 1)

More than half of the clinical mentors, 55%, express that they never feel the need for more support and resources to cope with the stress of mentoring and 64% of clinical mentors express that they always feel good when thinking about strategies to improve students' experience in clinical practice. The majority of clinical mentors, 92%, express that they never feel lacking in energy to meet the demands of mentoring. (See table 1)

The majority of clinical mentors, 94%, express that they never feel that they cannot give more to their students as mentors and 92% of clinical mentors express that they never see students as a burden, but rather as individuals with unique needs. Also we can see that 83% of clinical mentors express that they never feel emotionally involved in the success of their students and 78% of clinical mentors believe that they always help in the professional development of students through their mentoring. (See table 1)

By the other hand 89% of clinical mentors express that they always feel good when they see students succeed due to their leadership and 89% of clinical mentors always feel effective in mentoring and supporting the students they supervise and 72% of clinical mentors always feel competent in handling the challenges arising from their role as clinical mentors. (See table 1)

We have an equal percentage of clinical mentors, 34%, who think that they never and often see mentoring as just a task rather than a comprehensive experience. This is followed by 17% who think they always see it this way, and 17% who state that they sometimes view mentoring as merely a task rather than a holistic experience. (See table 1)

In this study 56% of clinical mentors always feel supported by their colleagues and the institution in overcoming the challenges of mentoring, followed by 30% who often feel supported, and 14% who state that they sometimes feel supported by their colleagues and the institution in facing these challenges.

The majority of clinical mentors (92%), expressed that they are never indifferent to the challenges students face during their practice. (See table 1)

The most part (58%) of clinical mentors believe that mentoring always helps them grow professionally and 45% of clinical mentors state that they often think about their mentoring work even when they are not working, followed by 33% who say they sometimes think about it outside of work, 19% who always think about their mentoring responsibilities outside the workplace, and only 3% who say they never think about mentoring outside the work environment. (See table 1)

CONCLUSIONS

- High emotional resilience: A significant portion of clinical mentors (64%) report never feeling emotionally or physically exhausted by their mentoring responsibilities, indicating strong emotional resilience and effective coping mechanisms.
- Positive perception of mentoring: Most mentors view mentoring as a meaningful and fulfilling experience, with 86% feeling satisfied seeing students professionally progress and 89% feeling proud of their leadership contributing to student success.
- Strong support and engagement: the mentors always feel supported by colleagues and institutions in overcoming mentoring challenges, and 92% are never indifferent to the struggles faced by students, reflecting high levels of commitment and dedication.

- Professional growth through mentoring: the most part of mentors believe mentoring always contributes to their professional growth, highlighting the reciprocal benefits of mentoring for both mentors and students.
- Work-life balance perception: A relatively small percentage of mentors think about mentoring outside of work, with 45% thinking about it frequently, suggesting manageable integration of mentoring responsibilities into their personal lives.
- Challenges in viewing mentoring as holistic: Equal percentages of mentors (34%) sometimes and never see mentoring as more than just a task, emphasizing the need for institutional efforts to reinforce mentoring as a comprehensive and rewarding role.
- Effective communication and support: almost all mentors report no difficulties communicating with students due to stress, and 72% feel competent in handling the challenges of mentoring, reflecting their preparedness and adaptability.
- Need for additional resources: While most mentors feel supported, 55% do not feel the need for more mentoring resources, although a smaller group still expresses occasional institutional support needs in handling mentoring-related stress.
- Commitment to student success: A substantial percentage (83%) of mentors report never feeling emotionally detached from their students, demonstrating strong dedication and involvement in students' professional development.

Recommendations

- Promote resilience training to help clinical mentors further develop emotional coping mechanisms in challenging situations.
- Enhance institutional support by providing resources and a supportive environment to strengthen mentor engagement and development.
- Foster a holistic mentoring approach that encourages mentors to view their role as a rewarding, immersive experience rather than just a task.
- Encourage work-life balance by offering mentorship flexibility to reduce burnout and maintain personal well-being alongside professional responsibilities.

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Conflict of interest. The authors declare no conflicts of interest.

Ethical consideration. The questionnaire of this study has been reviewed and approved by the Ethical Committee, Faculty of Natural Sciences, Department of Clinical Subjects, University of Shkodra No. prot. 83/1. Dt. 24/04/2024, Shkodër, Albania.

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