ISSN: 1947-380X



## **Current Literature Summary**

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Professional socialization is grounded in symbolic interactionism in which one actively and continuously interacts with others and the environment while transitioning from education to professional life. There is noted concern that the increased theoretical focus of professional education programs has diminished clinical training thereby leaving health care providers with a sense of inadequacy when entering the profession. The transition from education into the profession is multifaceted and some experience difficulties taking on the professional role. We will provide brief synopses of current research on professional socialization and discuss possible applications to athletic training.

Kramer M, Maguire P, Halfer D, Brewer B, Schmalenberg C. Impact of residency programs on professional socialization of newly licensed registered nurses. West J Nurs Res. 2011; http://wjn.sagepub.com/content/early/2011/07/31/0193945911415555.full.pdf+html. Accessed November 3, 2011.

Reviewed by Michael B. Hudson, Missouri State University

Summary of research context and methods: Professional socialization is the process of acquiring and internalizing the knowledge, skills, values, attitudes, and norms of the respective profession. The process begins with the professional academic program, transitions to the move into professional practice, and culminates with developing a professional identity and being integrated into professional communities. This article reports the fourth study from a nationwide research program examining practice environment factors supporting the socialization process—specifically the transition and integration stages—for newly licensed registered nurses. The researchers described the transition stage as a guided practice experience in an actual work environment intended to develop the mastery of skills, encourage the exploration of experiences outside the main practice setting, and reduce stress. The goals of the integration stage were described as developing a competent and independent professional, initiating competency in peripheral professional roles (ie, research, teaching, and service), and blending the new nurse into professional communities such as work groups and professional associations.

For this study, the authors employed a mixed-methods approach to examine 2 research questions. First, to what extent do

nurse residency programs reflect the professional socialization process? Second, what components, strategies, and activities of these residency programs are most effective at professionally socializing newly licensed registered nurses? The researchers collected quantitative data from an investigator-developed questionnaire and qualitative data from site visits and interviews. The researchers sampled 40 award-winning Magnet hospitals with established nurse residency programs. Of these 40 hospitals, 34 responded to the questionnaire with sufficient data to answer the first research question. The researchers then sampled 20 of the 40 hospitals to collect qualitative data for the second question. From these 20 hospitals, the researchers interviewed a total of 907 new and experienced nurses, nurse managers, and nurse educators who worked in units with confirmed healthy work environments.

Summary of research findings: Findings regarding the first research question indicated that all 34 nurse residency programs achieved four of nine goals of exemplary nurse residency programs: (1) bridge gaps in resident clinical skill set, (2) connect "book knowledge" to real-life clinical challenges, (3) foster esprit de corps among resident class, and (4) demonstrate residency program value. Although not one of the nine published goals for residency programs, findings also intimated that all 34 programs included the goal of developing techniques of selfcare, stress management, and restoration of self-confidence. Additional findings indicated that four programs employed multistage structures to complete the professional socialization process (ie, completed the transition and integration stages), while 14 other programs provided evidence suggesting they sufficiently fulfilled the professional socialization process (eg, competence with providing care; mastery of multiple patients; participation in research, teaching, and leadership; precepting

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## **Full Citation:**

Doherty-Restrepo J. Education literature: current literature summary. Athl Train Educ J; 2011;6(4):208-211.

other new graduates; and developing plans to foster personal and professional growth). Lastly, findings suggested that the remaining 16 programs exemplified the transition stage goals of the socialization process (ie, guided experiences, reflective seminars, and skill mastery).

For the second research question, findings indicated that the most universally perceived approaches to professionally socializing newly licensed nurses were the preceptor experience or the residency program itself. For the preceptor experience, the main factors perceived to affect its success were preceptor training, specific preceptor actions and behaviors (ie, guiding and teaching but not lecturing), and a balanced length of time in the experience. Additional key factors included recognizing that the socialization process continues after the preceptor experience and will include other individuals who provide clinical coaching (eg, consulting with an experienced nurse) and mentoring support (eg, receiving guidance from an experienced colleague on issues regarding life-long learning). Other perceived activities supporting the professional socialization process included reflective seminars, skill acquisition, and evidence-based management projects.

Implications for athletic training education/research: Nursing and athletic training recognize the importance of socializing newly credentialed practitioners into their respective professions. While nursing and athletic training do not mandate residency programs, both professions have developed structures for employers and higher education institutions to create accredited residency programs. Nurse residency programs, however, have been in existence longer than athletic trainer residency programs. Consequently, nursing has generated more research on the process and outcomes of its residency programs. While athletic training can use this research as well as the research from other professions to examine its programs, there currently is no published peer-reviewed research on athletic trainer residency programs.

The growth of athletic training education research over the past two decades has added evidence to the profession's body of knowledge in the area of professional socialization; however, the evidence only scratches the surface of the phenomenon because the research has examined mostly professional education. Athletic training education research regarding the transition and integration stages of the professional socialization process is noticeably lacking. For athletic trainer residency programs to achieve their intended goals, the profession needs to expand its research into these stages and related areas. For example, athletic trainer residency programs stress the need to improve the residents' mastery of their clinical practice and utilization of evidence-based approaches. However, the standards do not purposefully require programs to address issues of job retention. job satisfaction, life-long learning, and professional commitment for its residents. Nurse residency accreditation standards do expect such outcomes.

Bisholt BKM. The professional socialization of recently graduated nurses — experiences of an introduction program. Nurse Educ Today. 2011; http://www.sciencedirect.com/science/article/pii/S0260691711000827. Accessed November 3, 2011.

Reviewed by Katie J. Fox, Millersville University

Summary of research context and methods: Newly graduated or novice nurses are expected to move fluidly from student to professional upon qualification. Additionally, they are expected to possess a scientific approach to their mastery of professional knowledge and skills, a sense of professional responsibility, an independent work ethic, and an awareness of multicultural differences. As part two of a larger study, this study analyzed how participation in a year-long introductory program in Sweden by 16 newly graduated nurses affected their efforts to socialize themselves into the nursing profession. Data were collected utilizing ethnographic research methods in which the researcher directly observed the nurses' participation and interaction with others in the professional setting, thus allowing for the identification of any factors effecting socialization. Detailed field notes and transcribed interviews were analyzed to identify themes pertaining to their professional socialization.

Summary of research findings: The results of this study revealed that the novice nurses constantly needed to prove themselves, their knowledge, and their skills to co-workers in an effort to establish themselves professionally. They were expected to practice in a specific, medicine/science-oriented way or they were not accepted as a member of the staff. The researchers found that despite the good intentions of the introductory programs, they did not help make the newly graduated nurses' transition from student to professional any easier. In fact, they found the programs to be detrimental to their socialization into the profession as they did not address, but instead, magnified the areas that created the difficulties.

Implications for athletic training education/research: This article shows that introductory programs do not accomplish what they are created to accomplish. Clinical instructors should be proactive; taking steps during the education process to address the areas affecting socialization before the student graduates and becomes qualified. Accreditation standards for health care professionals (including nursing and athletic training) are structured around supervised clinical experiences and didactic learning. Considering the similarities between the two, it is possible that athletic training students may have the same issues as the nursing students while transitioning from student to professional. For future research, newly graduated and practicing athletic trainers could be surveyed to determine if their transition and professional socialization was strenuous, stressful, or difficult. These data could also be examined for correlations with the size of clinical education programs, number of approved clinical instructors, and quality of the clinical experiences.

Clinical education needs to be the link between academics and the profession. Therefore, this researcher emphasized the role of the supervisor (athletic training clinical instructor). Supervisors, and clinical instructors are regarded as role models and have a profound effect on how students foresee the profession. This research confirms that clinical instructors need to facilitate students' professional development by creating opportunities for them to gain confidence and fostering a sense of belonging all the while demanding active engagement in their own education. In conclusion, athletic training educators and clinical instructors should purposefully and strategically facilitate the professional socialization of athletic training students during clinical education experiences to avoid the issue of insufficient socialization into the athletic training profession.

Brown J, Stevens J, Kermode S. Supporting student nurse professionalisation: the role of the clinical teacher. Nurse Educ Today. 2011; http://www.sciencedirect.com/science/article/pii/S0260691711002061. Accessed November 3, 2011.

Reviewed by Joanne Klossner, Indiana University

Summary of research context and methods: Professional socialization (PS) is the process by which individuals learn the knowledge, skills, values, and roles that are characteristic of a given profession. Anticipatory or "pre-service" experiences, prior to becoming a member of the profession, play an important role in the PS of pre-professional or pre-service students such as nursing students. In Australia there is a high degree of student attrition from nursing education programs. In addition, organizational retention is also problematic during initial in-service years for novice nurses. Thus, there is a large impetus for understanding factors of retention and professional socialization of pre-service and in-service nurses. Socializing agents, such as clinical teachers, influence pre-service experiences for nursing students and thus may play an important role in the retention and PS of nursing students.

The objective of this research was to understand the role of the clinical teacher in the PS of nursing students as perceived by clinical teachers as well as recent nursing school graduates. Recent graduates of Bachelor of Nursing programs as well as nurses who serve as clinical teachers for nursing students in Australia were recruited via convenience sampling methods. Seven recent nursing school graduates and seven clinical teachers, representing three universities in Australia, participated in the qualitative aspect of a larger mixed methods research study. Qualitative data collection included short, semi-structured interviews with each cohort group. Data analysis included inductive content analysis. Interview transcriptions were coded by identifying key units (representative words, sentences or phrases). Like units were then placed in theoretically relevant categories as compared to the literature on PS.

**Summary of research findings:** Results indicated that clinical teachers play a role in the PS of nursing students in various ways. Specifically, 6 domains related to PS were identified, including: 1) professional role concept, 2) acculturation, 3) acquisition of knowledge, 4) acquisition of skill, 5) acquisition of professional values, and 6) assimilation into the organization. Ultimately, the clinical teacher was identified as a role model for student nurses as well as instrumental to the PS of nursing students within 6 domains.

Implications for athletic training education/research: Research on PS in athletic training supports the importance of role models or mentors as networks of support for pre-service and novice in-service athletic trainers. Clinical instructors, as well as others such as patients and peers, legitimize the role of the athletic

training student as a developing allied health care professional. Such legitimization is one factor that influences professional role concept or the identity of the student as a developing athletic trainer. Similar to nursing, athletic training also has a unique culture which impacts the development of student knowledge, skills, and values which are inherent in the field. In addition, each institution has its own unique culture which students or novice athletic trainers need to internalize to effectively assimilate into the institutional athletic training community. Further research is necessary, not only to determine the ways in which clinical instructors support the PS of athletic training students, but also other determinants within the pre-service curriculum, clinical education learning environment, and overall athletic training culture that impact the PS of pre-service students. Research specific to clinical instructors as well as other socializing agents or networks of support is also warranted. Ultimately athletic training education programs should consider all factors which facilitate or constrain the PS of developing pre-service athletic trainers (students). Clinical instructors should be educated about the positive role they can play in the PS process for students and be provided with tools and guidance to assist them with their own development as effective clinical instructors.

Condon E, Sharts-Hopko N. Socialization of Japanese nursing students. Nurs Educ Persp. 2010;31(3):167-170.

Reviewed by Jennifer Doherty-Restrepo, Florida International University

Summary of research context and methods: Professional socialization is a process by which students acquire an understanding and appreciation for the values, behaviors, and attitudes expected within a given profession. The professional socialization process involves active engagement and communication with mentors and peers to reinforce expected values, behaviors, and attitudes. Nursing students are provided professional socialization opportunities as they interact and communicate with faculty and nursing preceptors (clinical supervisors) in the didactic and clinical setting, respectfully.

Increasing numbers of students from Asian countries are attending graduate nursing programs in the United States. Because of restrictive Japanese laws, clinical experiences for nursing students are primarily observational which limits the development and mastery of clinical skills prior to entering the profession. Additionally, the Japanese culture discourages students from asking questions, which may limit the acquisition and integration of knowledge within the greater professional context. Given these cultural differences, the aim of this research was to identify ways Japanese students become socialized into the nursing profession. The researchers interviewed Japanese nursing students and faculty regarding the professional socialization process. The taperecorded interviews were transcribed and common themes were identified via comparative content analysis.

Summary of research findings: Five themes that positively contributed to the professional socialization of Japanese nursing students emerged: 1) openness to others' beliefs, 2) communication with practicing nurses, 3) team building, 4) reflection on clinical observations, and 5) extracurricular networking (volunteering). One theme, focused education, emerged as a barrier to professional socialization. Focused education, as reported by the students, resulted in values, behaviors, and attitudes that emulated the

faculty. Students reported a lack of support for the development of a broader perspective (cultural competence) within the context of the profession. Ultimately, Japanese nursing students became socialized into the profession through various, informal self-directed means.

Implications for athletic training education/research: Professional socialization is multidimensional and uniquely individualized. A student's transition from education into the profession may be facilitated by faculty and clinical instructors either formally or informally. Formal, or intentional, facilitation

of professional socialization includes faculty-assigned clinical reflection papers, peer mentorship programs, and clinical experiences supervised by a clinical instructor. For example. Informal professional socialization is self-directed and often occurs as a result of trial-and-error. Research on the formal and informal professional socialization of athletic training students and novice athletic trainers is warranted. This research could provide guidance for faculty, clinical instructors, and supervisors on ways to augment professional socialization and promote self-directed individualized transitions into the professional role.