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**Optimizing Mentorship to Improve Midwifery's Management and Leadership Abilities**

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**ABSTRACT**

**Background:** The experience of mentorship plays a vital role in the development of midwifery students. The objective of midwifery education in Indonesia is to improve leadership and management skills to help students transition into registered midwives. **Object:** This research examined how mentorship experiences affected midwifery students' readiness for leadership and management positions, as well as the challenges that hindered the effectiveness of mentorship in clinical environments. **Method:** This qualitative descriptive study included 20 final-year midwifery professional education students from the Health Polytechnic of Surabaya, who wrote essays reflecting on their preparedness for leadership, experiences in clinical learning, and their views on mentorship. The essays were analyzed using thematic analysis. **Results:** A majority of students felt inadequately prepared for leadership due to limited guidance and exposure to clinical environments. Mentorship experiences differed significantly, with some students benefiting from the process, while others faced difficulties adapting, pointing to differences in mentor enthusiasm, teaching skills, and leadership approaches. **Conclusion:** Gaining practical, hands-on experience is crucial for developing leadership and management competencies. Nonetheless, students encounter challenges in balancing their academic responsibilities with clinical practice, which restricts their chances to refine their skills. Implications for practice Implementing a standardized mentorship program and extending clinical placements would provide students with more time to adjust to healthcare settings, understand their roles, and enhance their educational experiences.

**Keywords:** Clinical, Leadership, Management, Mentorship, Midwives, Student

**BACKGROUND**

The daily care that midwives offer requires a strong foundation in leadership and management abilities, including as critical thinking, decision-making, and prioritization (Kebede et al., 2023). While management skills include staff organization, resource management, and effective direction, leadership skills explain the practical aspects of care, such as managing interactions inside or across multidisciplinary teams. The importance of leadership extends beyond clinical aspects of care and encompasses education, as emphasised by the International Confederation of Midwives

(Dr Sally Pezaro, 2024). Ministerial Decree No. HK.01.07/MENKES/1261/2022 is the Decree of the Minister of Health concerning Work Competency Standards in the Midwifery Sector, which serves as a reference for midwife development, training, and competency certification.

This standard outlines the competency areas and levels that midwives must possess to provide midwifery services, ranging from physiological to more complex cases, and covers aspects of knowledge, skills, and attitudes, including proficiency in

leadership and management skills (Kesehatan, 2022). These skills not only impact patients but also the quality of communication among multidisciplinary team members and midwives in clinical settings (Joy E. Adcock, Mary Sidebotham, 2022). Midwives in leadership positions must advocate, set a positive example and enhance team dynamics and coordination, ensuring the delivery of quality patient care (Dr Sally Pezaro, 2024).

Effective leadership and management skills contribute to increased professionalism, holistic care and competency among individuals (Nawagi et al., 2023). This positively affects their ability to perform activities that benefit themselves and those around them. These benefits are crucial for ensuring adaptability and awareness of surroundings, enabling the effective use of available resources for efficient teamwork and high-quality midwifery practice (Palimbo et al., 2023). Therefore, leadership and management roles have a profound impact on the entire healthcare system. Midwifery students need early exposure to leadership and management skills so they can prepare to take on these roles on becoming registered midwives (Sheehan, A. et al., 2023).

Early education on these skills can mitigate burnout or stress when facing issues such as conflict or miscommunication, which require good leadership and management capabilities (Arundell et al., 2024). Having a deep understanding of the role of leadership and management also ensures students are skillful and knowledgeable, becoming good role models for future generations of midwives, and offering extensive knowledge and experience in leading and managing team members (Palimbo et al., 2023). Mentorship plays an integral role in preparing students for effective leadership and management in clinical settings.

Mentors must ensure that midwifery students are thoroughly

equipped with the necessary skills and knowledge, so they are confident and competent in performing tasks independently (Sheehan, A. et al., 2023). Acting as guides, mentors serve as a bridge between the theoretical knowledge and practical skills acquired in academic institutions and their application in real-life clinical settings. This involves addressing challenges related to patient care, communication with women and family members, and collaboration in the midwifery team (Anderson et al., 2022).

Midwifery education in Indonesia is offered across multiple pathways and levels, including Diploma (D3) midwifery academies, vocational Health Polytechnic Programs, Bachelor (S1/D4) midwifery, and professional midwifery programs. Professional and higher-education pathways aim to combine theoretical knowledge with clinical practice to meet competency standards for safe practice (Presiden RI, 2023). Accreditation instruments and minimum standards for new and existing midwifery programs are provided by sectoral accreditors to ensure program quality. Midwifery education programme encompasses both theoretical and practical learning opportunities, allowing students to develop clinical skills as they progress through their course.

Throughout each semester, midwifery students undergo clinical attachments in hospital settings, such as maternity wards, labour rooms, accident and emergency departments, primary health care and clinics. These attachments provide invaluable hands-on experience, allowing students to apply the knowledge and skills acquired in the institute to real-life settings involving members of the community, including women, caregivers, healthcare teams and multidisciplinary team members. During the clinical attachment period, students are paired with registered midwives who serve as mentors. These mentors are tasked with supervising and serving as role models for the midwifery students, aiding in the practice

and development of their clinical, leadership and management skills.

To enhance students' adaptability and flexibility, mentorship assignments vary each semester, exposing students to different leadership styles and management approaches. The duration of mentorship aligns with the length of the clinical session, which can range from 2 weeks to 6 months depending on the academic year and semester. In the framework of the leadership and management module offered as part of the education programme, mentors are expected to impart skills such as resource management, task delegation, prioritisation and decision making. Students are encouraged to actively engage with their mentors, seeking clarification, guidance and feedback within the constraints of the clinical setting's limited time (Kolegium Kebidanan Indonesia, 2025).

A positive mentorship experience provides an invaluable learning opportunity for students to embrace their leadership and management roles more effectively and to rectify misconceptions or doubts before transitioning to registered midwives. However, the extent to which mentorship experiences influence the preparation of midwifery students for leadership and management roles, as well as the challenges that impact the effectiveness of mentorship experiences in clinical settings, remain unknown. This study's aims were to explore these questions by gathering insights from student midwives on their mentorship experiences, as part of their leadership and management preparation. This was completed as part of a larger project exploring midwifery students' experiences of the leadership and management module, part of which was previously published (Almorbaty et al., 2023).

## RESEARCH METHODS

This descriptive qualitative study assessed final-year midwifery students'

involvement in leadership and management modules and mentorship during their clinical attachment period.

## Participants

This study involved final-semester midwifery students from the Health Polytechnic of Surabaya who had completed the final stage of their professional practice, namely the management stage. This ensured homogeneity in the sample regarding the practice stage they had completed. The inclusion criteria were students who were fluent in Indonesian to facilitate communication and data collection. Students were not stratified based on variables such as age and previous clinical placement, as the goal was to gather diverse opinions and feedback from the student population. Overall, 20 students chose to contribute to this study. The researchers explained that their opinions would not affect their academic grades.

## Data collection

A total of 20 students submitted essays reflecting on their overall clinical experience, including mentoring, during clinical orientation. The essays had no word limit and were written in Indonesian. Participants were given one day to write their essays, which were then placed in a tray outside the researcher's room. The essays were collected at separate times to avoid unnecessary encounters between the researcher and the participants.

## Data analysis

The students' essays were thematically analysed using Braun and Clarke's (2006) guidelines to identify patterns of similarity or contrasting perspectives (Braun V, 2006). The themes found during analysis were discussed among the authors to assess their relevance to the research aims.

## Reflexivity and bias

To mitigate power imbalances between the researcher and students, the researcher used bracketing and limited unnecessary

interactions beyond the research scope with the participants. Gatekeepers were used to recruit participants to minimise interactions. During data collection and analysis, the authors engaged in frequent discussions to ensure that the results were purely derived from the students' feedback and were not manipulated or influenced by the authors' opinions. Bracketing was done to promote full transparency of the findings, which is essential for producing rigorous and credible research outcomes. Written consent was obtained during all interactions as a form of reflexivity.

### **Research Ethics**

Ethical approval for this study was granted by the Health Polytechnic of Surabaya Research ethics committee. Prior to participation, participants were asked to give informed consent and were briefed on the study's purpose. Students were invited to participate voluntarily, with the assurance that there would be no negative repercussions or penalties for declining to provide an evaluation.

## **RESULT AND DISCUSSION**

The three themes found were 'recognising the importance, facing the gap', 'inconsistent mentorship experiences' and 'recommendations for improvement'. While the participants recognised the importance of leadership and management skills for their future careers, they often felt unprepared. Limited opportunities to practice their skills during clinical placement left them feeling rushed and inadequate. Although mentorship was acknowledged as crucial, the participants highlighted that it could be inconsistent because of variations in mentor styles and experience. To bridge this gap, the students recommended improvements: consistent learning opportunities for all, pairing with skilled mentors, extending clinical placements and incorporating pre-graduation midwifery leadership training.

### **Recognising the importance, facing the gap.**

Although the participants recognized the importance of management and leadership abilities, their lack of real-world experience left them feeling unprepared. Most agreed that having strong leadership and management skills is essential for professional growth and that these abilities not only increased their professionalism and competency but also had a beneficial impact on team interactions, which in turn benefited patient care. Their preparedness was questioned, too, as many believed they were not given enough clinical experience or chances to hone their management and leadership abilities. The short length of clinical attachment sessions presented a problem, making students feel hurried and unprepared to effectively take on management or leadership roles.

'Although I recognize the value of management and leadership skills in midwifery, I think additional real-world experience is necessary to completely hone these aptitudes. The application of theoretical knowledge and the development of abilities like delegation, decision-making, and conflict resolution would be made possible by longer clinical placements' P10. 'Although there is a wealth of theoretical information on management and leadership, real-world application is crucial. We would be better prepared for upcoming issues if we had more experience in a variety of clinical settings and leadership positions'. P36

### **Inconsistent mentorship experiences**

Although the participants acknowledged the value of mentoring, they emphasized the inconsistent opportunities and quality of mentors. Every participant acknowledged the critical role mentors play in helping them develop into more capable managers and leaders in clinical settings. Participants noted a lack of opportunity to apply skills including communication, problem-

solving, and decision-making during their clinical sessions, while being able to identify the skills their mentors had taught them.

‘It's discouraging when we pick up useful skills from our mentors but aren't given many opportunities to use them in actual clinical settings. We require more organized chances to hone these abilities, including assigning tasks or handling challenging patient situations’. P2. During their assignments, some participants complained that they were unable to exercise these abilities at all. Although some participants gained from successful mentorship experiences, this was not always the case.

‘I am fortunate to have a wonderful mentor who has been of great assistance to me. However, I am aware that not everyone has the same experience. To guarantee that every kid has an equal opportunity to learn, we must enhance mentorship programs’. P7. Being assigned to different clinical sites or having mentors with varying styles and approaches contributed to discrepancies in the mentorship experience among participants.

### **Recommendations for improvement**

In order to fill in the gaps in their experiences with clinical attachment and mentoring, the participants offered solutions. To guarantee that each student could maximize their learning potential given the brief period allotted for clinical attachments, the participants suggested establishing consistent learning opportunities for all students. In order to support the development of leadership and management abilities, they emphasized the significance of matching up with trustworthy and knowledgeable mentors who could act as role models, instructors, and advisors. This recommendation came about as a result of some participants' encounters with mentors who were unable to guide or instruct students in the abilities that were required.

‘To make the most of everyone's brief time in clinical placements, learning opportunities ought to be more regular. Additionally, it would be very beneficial to have mentors who are truly skilled at leading, advising, and imparting the necessary skills rather than a staff member appointed at random’. P25.

In order to build rapport and trust with mentors and the medical staff, the participants also recommended lengthening the clinical attachment sessions. Longer attachment times were thought to promote improved interactions between students and medical professionals as well as a more seamless learning process. Long-term clinical attachments would also allow students to become more accustomed to the setting, which would improve their ability to carry out managerial and leadership duties that call for familiarity with the team members, resources, and facilities.

**‘Extended clinical rotations would be very beneficial. It would be simpler to assume leadership roles if we had more time to get to know the group and the setting so that we would be ready for the real world once we graduated’.** P39

Students emphasized the significance of obtaining sufficient training prior to becoming licensed midwives, as leadership and management abilities require a great deal of exposure and practice. Given the importance of these abilities for future professional activity, they emphasized the necessity of instilling them before graduation.

### **Discussion**

Mentors act as role models and provide mentees with advice on how to advance their knowledge and abilities. Mentors should be seasoned experts who can help recently graduated midwives and students in the field acquire the skills they need to become skilled practitioners. Mentors in midwifery care are essential in imparting important management and

leadership skills (Sheehan, A. et al., 2023). Communication skills are particularly integral to midwifery care, as midwives are expected to effectively communicate not only with their team but also with children, women and family members (Almorbaty et al., 2023).

Mentors should concentrate on teaching effective communication techniques, emphasizing awareness, empathy, and flexibility. Sustaining a healthy clinical environment requires sensitivity and knowledge of the woman's and the medical team's circumstances. The leader and the entire healthcare team gain from this, as it promotes the best team dynamics, motivation, and professional relationships that support job satisfaction and career advancement (Sheehan, A. et al., 2023). In addition to improving the quality of care and health outcomes, establishing good communication with women during care also helps a team leader build rapport and trust with the woman.

It is crucial that mentors employ dynamic and creative teaching strategies that encourage mentees to advance their managerial and leadership abilities while sustaining their drive to keep getting better (Adnani, Qorinah Estiningtyas Sakilah, Andrea Gilkison, 2022). To guarantee that mentees may become independent, mentors should assume whole responsibility for their growth and offer suitable supervision (Anderson et al., 2023). When questions or misunderstandings occur, mentors should also act as forums and sources of reference for mentees to seek advice and clarity. It is essential to adapt teaching methods to each mentee's unique demands. To guarantee that learning goals are fulfilled by the conclusion of the clinical attachment session, mentors and mentees must communicate effectively.

Mentors can effectively assist mentees in their professional development by encouraging open communication and modifying their teaching strategies

accordingly (Griffin et al., 2023). Mentors must exercise caution to avoid spoonfeeding mentees or fostering over-reliance, as this can hinder mentees' independence and development of autonomous leadership and management skills (Abdul-Rahim, Hadi Zulhiqman, Sharimawati H Sharbini, Mursidi Haji Ali, 2024). When mentees rely too much on their mentors, they could stay in their comfort zones, which could squander time during clinical placements. Early on in the mentor-mentee relationship, it is important to clearly define roles and objectives so that both sides may come up with ways to make the most of their teaching and learning opportunities during the brief clinical attachment session (Ruwayda, Hastono, 2024).

Mentors should remain accessible to mentees to address any confusion and provide opportunities for reflection and discussion on progress or concerns (Anderson et al., 2022). This proactive approach helps to avoid future setbacks by addressing misunderstandings early. Unquestionably, the mentor plays a vital part in helping the mentee learn, but it is just as important for students to actively seek out information outside of their mentorship. By improving their comprehension and preventing them from depending entirely on one source, this supplemental education maximizes their preparation time (Arundell et al., 2024). Together, the mentor and mentee should decide on learning goals and evaluate each other's advantages and disadvantages. This self-analysis serves as a basis for organizing how to efficiently use the tools available to solve learning gaps during clinical placement (Sattar, Saifullah Muhammed Rafid Us, Oluwaseyi Akeredolu, Malin Bogren & Borneskog, 2023).

### **Challenges impacting mentorship effectiveness**

According to the midwifery students' input, there are a number of

difficulties that are similar to those that mentors frequently encounter. Different teaching methods may result from mentors' subjective viewpoints, which are influenced by their individual experiences in the clinical setting. The leadership and management style that mentees are taught can be influenced by various factors, including interactions with patients, the midwifery team, and the resources that are available (Gray M, 2021).

Mentors may also differ in their motivation for undertaking mentorship responsibilities. Whether a mentor is driven by a personal desire to teach, is assigned based on a recommendation or is randomly assigned will influence their approach (Gray M, 2021). These variations could affect mentees in a good or bad way. To avoid overwhelming trainees, mentors' enthusiasm should be suitably matched with their level of understanding (Amodi, 2024). Participants in the current study emphasized that they had mentors who were not equipped with the skills or knowledge needed to serve as effective role models for management and leadership. Since their mentoring has a big influence on students' development in these areas, mentors must be honest about their own talents before accepting the position.

While remaining professional and avoiding criticism, discouragement, or intimidation due to variations in academic background, comprehension, or learning speed, mentors and students should be receptive to teaching and learning. (Amodi, 2024). Another common obstacle associated with mentorship is differences in expectations. Mentors may have expectations for students that misalign with the students' objectives, hindering their learning progress (Gray M, 2021). For example, two students in the current study stated that their mentor misinterpreted the goal of their attachment, which prevented them from practicing leadership and management skills during their clinical attachment session.

A misinterpretation of roles resulted from a communication breakdown between the mentor and students regarding the learning objectives during the clinical placement session. The mentor thought that rather than concentrating on gaining management and leadership abilities, the final-year students were there mostly to help staff with work. As a result, the students worked with healthcare professionals to do daily duties including administering medications. For example, two students in the current study stated that their mentor misinterpreted the goal of their attachment, which prevented them from practicing leadership and management skills during their clinical attachment session.

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The students discovered that it required some time to become acquainted with the clinical setting, the surroundings, the medical staff, and the amenities. Building rapport and trust with the mentor and healthcare team requires appropriate introduction, initiation, and an attempt to show commitment to learning and contributing to the team over the usually

weeks-long orientation phase (Joy E. Adcock, Mary Sidebotham, 2022). This process usually took over a month, especially for students who were new to the clinical setting, compared to those with previous clinical experience at the same location, leaving less than 2 months of placement to develop their skills.

### **Implications for practice**

Gaining management and leadership abilities requires a great deal of real-world, hands-on experience. To genuinely improve abilities like conflict resolution, resource allocation, and critical thinking, a significant amount of work and engagement with important people in the therapeutic context are needed (Palimbo et al., 2023). The participants' worries about juggling other academic obligations, assignments, module duties, and tests took their focus away from actively practicing and accomplishing their learning goals for management and leadership skills. Standardized mentorship programs and longer clinical rotations should be a part of future practice to improve midwifery students' preparedness for management and leadership positions. Their clinical experience, skill development, and comprehension of healthcare contexts will all increase as a result. Furthermore, adding formal and creative leadership and management training to midwifery education can give students the tools they need to succeed in these positions.

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### **Limitations**

This study only looked at the opinions of students and used student self-reported data, which could be subject to recall bias. The viewpoints of clinical instructors or mentors may be included into future research. To better understand the elements affecting mentor effectiveness and create plans to improve mentorship experiences, more study is required.

### **CONCLUSION**

Midwifery students acknowledged the importance of management and leadership in their development as capable and flexible midwives, but they also indicated a desire for more exposure and learning opportunities under the supervision of designated mentors. This is necessary to guarantee a thorough and fruitful clinical learning experience. Students also emphasized the value of having mentors who are trained in management and leadership and who can meet their learning needs. Students would be able to successfully duplicate and apply their knowledge and abilities in practical situations as a result.

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