Preceptors as Positive Pygmalsions

Dust the cobwebs off your brain and take a step back in time to grade school when you were first introduced to Greek mythology. Do you remember learning about Pygmalion? He was a sculptor and prince of Cyprus who created a beautiful woman out of ivory and then fell in love with it. He believed so strongly that the statue could come to life that it did. The god, Aphrodite, intervened and breathed life into Pygmalion’s creation. The woman became known as Galaeta (Buxton, 2004). Pygmalion was brought to life for the stage by playwright George Bernard Shaw in 1916. In 1964, Shaw’s Pygmalion was transformed into a film adaptation, titled My Fair Lady, and the concept of the self-fulfilling prophecy was popularized.

The self-fulfilling prophecy is a concept coined by the preeminent sociologist Robert Merton (1968). The concept had four key tenets: (a) Certain expectations of people or events are formed, (b) those expectations are communicated with various cues, (c) those cues are responded to by people adjusting their behavior to match them, and (d) this results in the original expectation becoming true. In other words, we get the behavior that we expect.

This concept was further explored in an unsettling study conducted by Rosenthal and Jacobson (1992). The pair worked with teachers of elementary-school children. The teachers were informed that 20% of their students were exceptional and that these children were expected to outperform their classmates. (In actuality, there was no significant difference in any of the children’s abilities.) The study demonstrated that the “exceptional” children gained 4 points in overall IQ, 2 points in verbal ability, and 7 points in reasoning. There was no difference in the time the teacher spent with either group; the difference was in the quality of the interaction between student and teacher. The teacher encouraged the “exceptional” students by using more positive facial expressions, engaging posture, and modulating her voice to communicate positive affirmations. Following this study, one of these authors (Rosenthal) dedicated his career to the study of verbal and nonverbal influences on the self-fulfilling prophecy.

Four variables influence the self-fulfilling prophecy. The variables are climate, input, output, and feedback. Climate is the positive work environment that surrounds either the student or employee. It is emotionally and socially safe and promotes a belief that everyone is important and brings something unique to the classroom or work setting. Input is the work assigned to the learner or employee. Teachers and managers who believe that students or employees are “high performers” assign more challenging work.

Output is the opportunity provided to the student or employee to express an opinion or to disagree. Greater attention and guidance are provided to those individuals perceived as “exceptional.” Feedback is the intentional, deliberate positive reinforcement provided when learning is achieved. Praise is offered for good work, and criticism is minimized when a mistake is made (Rosenthal & Jacobson, 1992). When these four variables are structured positively, the “high performer” flourishes. Conversely, when these four variables are negative, the individual struggles or may be unsuccessful. The self-fulfilling prophecy or Pygmalion effect has valuable lessons for preceptors.

First and foremost, it challenges us to be aware of our biases. Occasionally, preceptors have preconceived ideas about the preparation of novice nurses from “certain” nursing programs. They may doubt the level of expertise an experienced nurse brings from another hospital, questioning the exposure to system or patient complexity. In
short, they do not believe that the individual has “what it takes to be successful” at the organization. Covertly, and perhaps innocently, preceptors challenge the orientee subtly about a clinical decision or may express surprise when an orientee responds with the correct answer. Preceptors may also have biases regarding age or demeanor of an orientee. Some preceptors may not believe that a person of a certain age will have the stamina to keep up with the clinical demands of a busy unit or may be too young to have the requisite skills necessary to manage the acuity of patients. Still, other preceptors may be bothered by a novice nurse’s display of self-confidence, deciding prematurely that this neophyte has an overinflated perception of his or her abilities. These “rush-to-judgment” opinions can dramatically alter the success of the new nurse.

**Second, the preceptor-orientee relationship is a dynamic partnership.** Inherent in this relationship is the ability to engage in meaningful dialogue about patient assignments, clinical decisions, and skill development. When new nurses have multiple preceptors, this relationship never develops. As a result, orientees miss the opportunity to question a preceptor’s choice without fear of reprisal, to delve deeper into physiological conundrums with a trusted guide, and to have one individual advocating on his or her behalf. Creating a nurturing environment and attending to the quality of communication between preceptor and orientee are as important as modeling clinical skills.

**Last, feedback is at the heart of all good teaching.** For feedback to be instructive, it should be descriptive, accurate, and helpful. It should also occur frequently. Feedback affords the orientee the opportunity to make practice changes. When a preceptor provides feedback routinely, it conveys an interest and investment in the orientee’s success. Statements such as, “You gave Mr. Anderson’s insulin in his thigh this morning. Is there another site that might be preferred when giving Humalog?” “When performing the neuro assessment of Mrs. Harris, you noticed a change in her right hand grasp that was not documented before.” “When Mr. Freeman challenged you about the new medication, you listened to his questions, double checked the medication order, and alerted the physician about his concerns. Mr. Freeman told me later that he was grateful that you had ‘listened’ and not argued with him.” Occasionally, a more prodding approach to feedback may be necessary when an orientee is struggling. A question such as, “Would you be willing to receive feedback from me about how your anxiety is getting in the way of your problem solving?” suggests a sincere desire to provide insight that the orientee may be lacking. Offering feedback is integral to communicating positive expectations and is provided more often to those individuals perceived as bright, earnest, and receptive.

All preceptors can be positive “Pygmalions.” It requires abandoning first impressions, believing in the success of all new nurses, and committing oneself to regular and insightful feedback and ongoing dialogue about the orientation process.

Please e-mail us and share your positive Pygmalion stories with us so that other readers can learn from you as well.

Mary Beth and Mary

**REFERENCES**


Shaw, G. B. (1916). *Pygmalion* [Stage play].