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RESEARCH ARTICLE

NEEDS AND EXPECTATIONS OF MENTORSHIP PROGRAMME IN MEDICAL COLLEGES: VIEW POINTS OF SOME UNDERGRADUATE MEDICAL STUDENTS

Padhy Gouri kumari *¹, D'Cruz Deula Candida², Vinod Ashwin P³, Sarnaik Gaurav²
Shridhar Raghavendra³, Nair Anjana S² and Makda Mustafa²

¹ Department of Community and Family Medicine, AIIMS, Raipur

²Eighth semester undergraduate medical students, AIIMS, Raipur

³Inerns, AIIMS, Raipur

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ABSTRACT

Introduction- National doctors' day is celebrated on 1st of July every year in India, medical colleges conduct various activities to sensitize budding medicos regarding diverse issues related to medical professions. An essay competition was organized in our institution to know the viewpoint of undergraduate medical students regarding needs and expectations of mentorship programme in medical colleges.

Method- Contents analysis was used to analyze data related to the viewpoints given by students through essays.

Result- Mentorship is a relationship in which a more experienced or more knowledgeable person helps to guide a less experienced or less knowledgeable person. Medical students need support and guidance of a mentor during their student hood period to handle difficulties related to academic and non-academic activity of their life. A mentor has the responsibility of nurturing, counseling, showing, guiding, helping, supporting, advising, empathizing, monitoring, accompanying, motivating and catalyzing. A mentee is also supposed to reciprocate and take initiative in establishing and maintaining mentor mentee relationship. Faculty members, senior students, or senior residents of the same institution can act as a mentor. A successful mentorship programme will lead to decreased incidence of failure rate, substance abuse, mental illnesses and suicidal attempts among medical students.

Conclusion- Mentorship programmes in medical colleges are the need of the hour in India. This drive has the power to build the character of medical students. Not only is it advantageous to the mentee's student life, but also it is beneficial to the society by providing improved care by quality doctors.

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INTRODUCTION

National doctors' day is celebrated on 1st of July every year in India to provide honor to the legendary physician Dr. Bidhan Chandra Roy. Healthcare organizations organize variety of events and activities for the campaign celebration. Some activities are also organized at medical college level for encouraging young medical students toward the dedicated medical profession.

An essay competition was organized by the Department of Community and Family Medicine for undergraduate medical students in our institution on Doctor's day. Total eleven students participated in this event. One of the topics for this competition was "Needs and expectations of Mentorship programme in medical colleges". Instances of substance abuse, mental illnesses and suicidal attempts among medical

students has become an issue of concern these days; keeping these things in mind this topic was selected for essay to assess the perspective of the youngsters in this context.

METHOD

Content analysis was used to analyze the data. This was done by reading each essay carefully from beginning to end. While reading each essay, text that appeared to describe an emotional reaction were highlighted and in the margin of the text a keyword or phrase that seemed to capture the emotional reaction was written (codes). After open coding of three to four essays, preliminary codes were decided. Then remaining essays were coded (and the original ones were re-coded) using these codes and adding new codes whenever required. Once all essays had been coded, the researcher examined all data within a particular code. Some codes were combined during this process, whereas others were split into subcategories. Finally, the final codes were organized into a hierarchical structure for better description of contents.

*Corresponding author: Padhy Gouri kumari

Department of Community and Family Medicine, AIIMS, Raipur

RESULTS

Concept of mentor

In the journey towards becoming a great doctor, the first step is that of an MBBS student. Studentship is the first phase in every medico's life, which marks his entry into this profession. A bunch of eighteen-year-old wide-eyed boys and girls, infused with enthusiasm and curiosity, take admission in the course, to learn everything that the exciting new field has to offer them. The progress of a student depends upon his/her capabilities and hard work. However, this hard work would amount to nothing if it is not in the right direction. The person would never reach the destination. In every aspect of a medical student's life, a guide is essential to nurture his capabilities, during the entire five and half years of MBBS course. This person, called as a "mentor", is usually a faculty member assigned to look after the welfare of a student or a group of students under mentorship programme. Mentorship is a relationship in which a more experienced or more knowledgeable person helps to guide a less experienced or less knowledgeable person¹. The concept of mentorship brings to mind new and unprecedented ways of how a student interacts with someone who is superior to him in both age and knowledge. A mentor is widely regarded as both a parental and authoritative figure who can serve as a guiding light to the students.

Why do medical students need a mentor?

Students, especially adolescents and young adults, do require guidance when it comes to certain matters in life. At times, they misuse social and financial liberty given to them. A student, especially a medical student who in general, faces more pressure and stress in comparison to their counterparts in other fields of education, are very much in need of a good mentor. The teaching method, enormous text books, hectic study schedule, tongue twisting terminologies, staying away from home, adjustment in hostel, new environment, new language, new culture, change in food, trouble with studies, high expectation from parents, constant pressure to excel... all these may cause stress. Issues like ragging, personal problems and addiction may aggravate the situation. Not all students have the same capability to handle stress; some students can overcome stress on their own, whereas some need help. Childhood achievements and legacies of scoring 90% mark in board exams becomes a thing of the past, one has to strive hard for securing even 60% mark in this profession. At times, one has to face failure also and acceptance of failure in any examination becomes very difficult for a meritorious student.

Expectations from a mentor

Mentor-mentee relationship is a very precious one. For a proper relationship, the mentor should be receptive to the needs and expectations of a mentee. He should be able to devote quality time for regular/frequent interaction with the student. He should undertake this as a part of his job responsibility instead of considering it an additional burden. The interactions between the two help in laying the foundation of a strong student as well as a good human being.

A student teacher relationship where the boundaries of student and teacher are overlooked and the two are something akin to

close friends, would help the student to express his thoughts more freely and matters otherwise bottled up inside would come out. Issues like ragging, addiction, personal problems, etc. can now be discussed without any hesitation or restriction. Support and advice are the two main needs of a medical student. A student may be having trouble with studies or difficulty concentrating in class. Whatever may be the reason, the reassuring presence of a mentor, whom the student knows that he can approach and talk to, will do wonders in improving his situation. If one's mentor is open minded and willing to listen to what is bothering the students; then half of the work is done. Discussion about the views and opinion regarding the problem and listening to a mentor's feedback are enough to make anyone feel better. Mere listening on the part of a mentor at times vents off the mentee's worries.

The expectation of a student when he approaches his mentor varies with each individual. He may expect advice in terms of how to handle the vast curriculum: what to read, how to read, how much to read and endless other questions which crop up in a student's mind must be answered. If left unattended they would eat him from inside. Medical students often face this problem and turning towards someone who has been through the very same situation, and surpassed it; gives them purpose and direction. The student may also turn towards his mentor when he is unable to make a decision on his own; or does not have enough data regarding the matter, to make the decision. For example, whether one should pursue PG coaching classes or not, while doing his undergraduate course. If the mentor offers, proper guidance and counseling and basic background information regarding the matter then, the process of making decision become easier. Besides these, a student also hopes to discuss personal matters with his/her mentor and expect to be offered some compassion and guidance. It is of utmost importance that the mentor empathizes with the student and understands his situation before proceeding with the conversation because use of strong words or a harsh look can sometimes do more harm than benefit, regardless of the intention. As medical students, one expects that he/she will be able to approach his mentor with ease, see him as a friend rather than a teacher or authoritative figure that holds power/control over him. A mentor should be someone, one can confide in without worry of being prosecuted.

Some mentors when approached by students reply with the words: "you can come to me whenever you need some help" however the mentee may not even visit for second time. Regular, frequent interactions are required for rapport building and winning the faith of mentee. Only then can one share his emotions freely (both academic and personal). During regular interactions, the mentor should make an effort to nurture basic human values (self-confidence, positive attitude etc), moral values and professionalism. He should also give guidance regarding how to cope with stress, how to manage time effectively. Suggesting other resources-like a good book or movie, at times, even sharing his life experiences is of great help.

A mentor should have contact details of the mentee and his parents; he is also supposed to have an idea about his hobbies, favorite teachers, close friends and date of birth. He should keep a track of the mentee's performance, attendance and participation in class activities. He should always be on the

lookout for warning signs. This especially goes for students who are introverts and are unable to communicate effectively. Peer pressure or vast syllabus may drive them into bad habits. A healthy talk can easily prevent serious situations like drug abuse, alcoholism or depression. The latter, is a condition that is hugely underestimated, yet holds a firm death grip around the neck of many medical students. Its relevance has increased now more than ever.

Going an extra mile by wishing him on his birthday, sharing a few soft words during the period of ill health or holding a mini celebration for small achievements can make a great difference in mentee's life. By doing this the mentor shows his care and concern and the mentee gets the feeling that there is someone concerned about his academic growth and happiness. Mentor can act as a catalyst or a motivator. There are certain points at which students might need a little push to get through something. Keen observation and a pat on the back for praiseworthy deeds are sufficient to ignite their inner spirits most of the times. Identifying their hidden talents and giving scope for their development also helps in building their self-confidence. So, overall, mentor has the responsibility of nurturing, counseling, showing, guiding, helping, supporting, advising, empathizing, monitoring, accompanying, motivating and catalyzing.

Expectations from a mentee

The success of mentorship is two-sided, with responsibilities falling on the mentor as well as the mentee. A mentee should take initiative for mentor mentee interactions, by fixing timings for future meetings (as per convenience of both). He should discuss matters openly, have faith in the mentor, listen attentively and accept constructive criticism (if any). Ultimately, he should modify his behavior by incorporating inputs provided by the mentor. Some mentees want to enjoy the liberty or freedom given to them during the period of college life, while some others have prejudiced thoughts that mentors may create some restriction in their freedom. A few even consider themselves mature enough to handle all kind of situations and while some do not have faith in the program, considering it a waste of time. Such students rarely show any interest in developing mentor-mentee relationship. At times previous bad experiences with a faculty, who is also a mentor, causes hindrance in establishment of bonding of mentee with mentor.

Who can be a mentor?

Faculty members, senior students, or senior residents of the same institution can act as a mentor. Senior students as mentors are easy to approach and give a feeling of openness, which makes the scenario more comfortable for conversations related to certain personal issues. Teachers as mentors are more knowledgeable and resourceful; they can also act as a channel for transfer of message from student to administration whenever required. Advantage of one category becomes the disadvantage of other category and vice versa.

Senior resident (SR) can also act as a mentor, but residents in any institute is only for a limited period of three yrs. Therefore, it is feasible to have SR as mentor, provided there is a mentorship rotation policy. In institutions with a system of fixed allocation (mentors once allotted remain as mentor for entire period of 5 and half yrs), SR may not be a good option. In such situations, one member of the institution

should be entrusted with the responsibility of overseeing this transition (completion of 3 yrs service period of SR) and allotting a new mentor when the previous one leaves the institution (SR or any other mentor faculty).

Some questionable issues in implementation

It is difficult to comment on which policy is better, fixed allocation of mentor for entire student hood period of MBBS or rotation of mentors at 1-2 yr interval, each policy has its own advantages and disadvantages. Which one gives better output, assignment of mentor to mentee or selection of mentor by mentee, this also is a questionable area, each method possesses certain pros and cons.

Outcome of a successful mentorship programme

A successful mentorship programme will lead to decrease in dropout rates & failure rate, a reduction in incidence of substance abuse and mental illnesses and will help in bringing down rates of suicide /suicidal attempts among medical students. It will also lead to improved self-confidence and better performance of students, which in future may help in bringing laurels to the institution. The ultimate result will be the creation of competent doctors & good human beings to serve the masses, leading to better health of the community. Mentor becomes the role model for the student, and someone that he wants to follow both in his personal and professional life. When a student gets care and affection during his student hood, on becoming a teacher in his future life, he reciprocates by showing similar care and concern for his students, and the cycle continues for generations.

Challenges in implementation

Large number of mentees allotted per faculty member and lack of suitable time for interaction pose hindrance in implementation of the programme. During official hours, students are busy in attending classes and beyond class hours, faculties are not available for interaction. Lack of interest (from either side) may further worsen the situation. Very often, because of lack of time, the mentor plans for group mentoring. Some issues, which can be dealt in a better way by one to one interaction, may not be adequately addressed in group mentoring, though group mentoring at times may help in developing better inter personal relationship among group members.

Way out

Keeping a favorable faculty student ratio (one faculty member as a mentor for 3-4 students) during allotment and including a prescheduled fixed period for interaction (at least once in a month) in time table (based on convenience of both) will solve most of the problems. In exceptional situations, when it is not feasible to have face to face interaction, use of telephonic conversation and email communication can be resorted to, but these things should not replace regular face to face interaction. At least the first mentor mentee interaction can be officially arranged soon after allotment to break the ice. A meeting can also be planned to brief the mentor as well as the mentee regarding the expectations from the programme. Continuous-periodic evaluation of the programme to assess its effectiveness may indirectly help in its smooth implementation.

DISCUSSION

Various studies evaluated the experiences of students and faculty enrolled in mentoring programme, these studies revealed that majority believed mentoring to be a good initiative; many believed the mentee to get benefitted; mentors also reported having improved communication and affective skills^{2,3,4,5,6,7}. The mentoring programs aim to provide career counseling, develop professionalism, increase students' interest in research, and support them in their personal growth³. Mentored students also had better sense of overall well-being, the personal student-faculty relationship was important in such cases³.

A mentor was supposed to empower and encourage the mentee, be a role model, build a professional network, and assist in the mentee's personal development^{3,5}. A mentee was supposed to set agendas, follow through, accept criticism, and be able to assess performance and the benefits derived from the mentoring relationship³. In a study by Baligh *et al*, mentee preferred mentors they selected rather than ones assigned to them⁴. There was no mentor-mentee contact in one-third of the cases in a study by Bhatia *et al*, the commonest reasons cited were lack of mentee initiative, time and commitment². Although mentoring is acknowledged as a key to successful and satisfying careers in medicine, formal mentoring programs for medical students are not in place in most countries, and where ever the program exists, evaluation of the programme to assess its effectiveness is lacking^{3,4}.

CONCLUSION

Mentorship programmes in medical colleges are the need of the hour in India. This drive has the power to move mountains, ignite the lamp of knowledge and obliterate darkness. It helps in building the character of medical students, which cannot be achieved by reading books. Not only is it advantageous to the mentee's student life per se, but in the long run it also improves the quality of doctors that he will become. Hence, combined efforts from the side of students, faculty and administration are vital to make mentorship programme a reality in every medical college.

Good mentors and role models are important to students in order to temper their optimism, control their skepticism, and to help them to be realistic, about not only their expectations of medical practice, but also about what society expects of them.

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