

Pediatric Insight

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The Role of Pediatric Leadership in Mentorship

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Playing a positive and supportive role in nurturing the careers of young academicians is one of the most satisfying activities in academic medicine. As leaders in Pediatrics, the ability to spark and focus the desire amongst our faculty to help others grow and become successful can be an important and rewarding part of our careers. Whether as a leader in clinical work, a research project, or in the role of division chief or chair or other senior academic position, we have an opportunity to create a culture where support and encouragement for junior faculty thrives and multiplies.

Since the mythical Greek god Mentor was appointed by Odysseus to watch over his child, the term mentor has been used to describe an individual who concerns themselves with the well-being of another. In academic medicine the term has evolved under common usage to describe a trusted individual who oversees a (usually) younger person's professional development. While this can focus on the more concrete issues of science, medicine, and research, most would agree that contemporary mentorship also includes professionalism, personal growth, ethics, values, and the art of medicine/science.

As leaders what we say and how we act matters, in other words other faculty are watching. How we talk about mentorship and its importance can make a big difference. Many find it easy to see the numerous issues that burden the typical faculty member from electronic records, regulations, and bureaucracy and say there is no time and little incentive to mentor other faculty. Fortunately, as leaders we are able to correct that misconception.

From the perspective of the mentee the benefits of mentorship are often readily apparent, and an increasing wealth of research demonstrates that a strong mentoring relationship can result in numerous benefits ranging from higher pass rates of certification (ABIM) to more successful academic careers (Yifang et al.). In addition to the clear benefits to the mentee, many experienced mentors argue that the mentor can be a major benefactor as well. Many claim that as mentors they have experienced greater productivity, career satisfaction, and personal gratification. As a hedge against burnout, encouraging mentorship can have a significant positive impact on the faculty at large.

Formal mentoring is sometimes viewed as less important after formal training has ended, however given the degree of investment in junior faculty for recruitment and successful navigation of what is often perceived as the "hidden curriculum" of academic medicine it is prudent to take steps that will ensure the likelihood of success. More formally established mentoring programs are often structured as dyadic and many experienced mentors feel a formal agreement can bring about a higher degree of success. Expectations, timelines, and meeting

schedules are more likely to be met if they are laid out early in the process, often by a contractual arrangement. While they can clearly be modified as trust in the relationship develops, this formalized approach can provide a framework to facilitate forward progress from the outset.

When discussing the mentorship process with faculty it is important to lay out the pathways to success in mentorship and common pitfalls that can lead to an undesired result. Successful mentors are self-aware, can establish respectful interactions, can set clear boundaries and expectations and are good communicators. Although there are real benefits that the mentor can derive, it is important to emphasize that whether the mentoring relationship is formal or informal a good mentor exhibits altruism, generosity, confidentiality, and selflessness. They are good active listeners, available, approachable, and give constructive feedback. A fundamental principle is to guide but not be proscriptive. Listening is often more important than talking. The following is a checklist for mentors that some have found helpful (Chopra et al.):

1. Ask yourself “why are you mentoring?”
2. Put yourself in the mentee’s shoes –
3. Practice slowing down – being present – no laptop, phone or to do list
4. Be grateful – say thank you a lot. Mentees who feel valued work harder
5. Embrace selflessness – guide not command, suggest not lead, revise not reject. It isn’t about you, it is about the mentee

The mentee should approach the relationship with realistic expectations. Choice of an appropriate mentor is very important and, as will be discussed, often mentees have multiple mentors. At the end of the day the mentee should choose someone as a mentor that they can admire and aspire to be like. If they are engaging in a formal relationship they should have and feel free to openly discuss any agreed upon guidelines, meetings, and timelines. If there is agreement on these issues the mentee should do their best to adhere to them. In a strong relationship with a mentor the mentee should feel free to have a frank and open discussion if they feel their needs are not being met.

The pitfalls that can cause the mentoring relationship to become a negative experience and ultimately fail are best recognized from the start. The mentee must be guided into meaningful tasks and in projects that they are interested in. The line between working on the mentors’ projects and having the mentee become a creative thinker and develop their own research projects is one that should be crossed as soon as possible. Interestingly, research has shown that becoming a coauthor on a larger number of the mentor’s papers is inversely related to a successful career by the mentee (Yang et al.).

While there are advantages to a formal mentoring program, less structured and more informal mentoring programs are more common and may often be more practical. Studies have suggested that despite the advantage of formalized mentoring relationships over half of clinical departments do not have structured mentoring programs. The time requirements of a formal mentoring program and the multidisciplinary approach required to address many of the clinical and research issues in the contemporary world make it difficult to implement the dyadic approach (Nyayaneet et al). One of the drawbacks to the informal approach is that it tends to focus on shorter term goals that are more tactical than strategic or career oriented. This more informal approach can also magnify the problem of social exclusion, appealing to more extroverted mentees who are more confident in approaching seniors, marginalizing those who are introverted or who are members of traditionally marginalized groups (Chopra et al.).

As a practical matter many junior faculty find great value in having a network of mentors, particularly, as noted above, in clinical programs where multiple disciplines are involved. Another advantage of the multiple mentor model is that it tends to be less time intensive from the perspective of each mentor. A mentorship team approach can also incorporate faculty who share various aspects of the mentee's cultural background. Given that there are relatively fewer senior faculty who are female or from traditionally underrepresented groups, a mentorship team approach may be particularly advantageous. This can lessen the feeling that some of these mentors may feel overtaxed. Some have suggested that peer support groups are also helpful when there is a lack of sufficient senior mentors that have a cultural match. Others have suggested the use of near mentors or those who are relatively close in age or seniority.

Regardless of how mentorship is approached it is important to make certain that faculty know that you feel mentorship activities for developing faculty are important. As a leader how you choose to spend your time with faculty is one of the ways that the importance of an idea is established. Regular conversations with department leadership around mentorship is one way to do this, and annual reviews with faculty can include discussion of their mentorship activities. Periodic items in department meetings drawing attention to a junior faculty member's accomplishment and their mentors' support can be noted, or similar consideration can be shown in an electronic newsletter. Yearly reviews with the mentees can focus on which individuals were involved in mentorship, even those informally involved. Letters from the departmental leadership to those identified as mentors during these meetings can be very helpful and even be used in support of promotion. This attention will go a long way towards establishing a culture that values collaboration and creativity.

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