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<https://escholarship.org/uc/item/6d16h765>

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Publication Date

2022

Data Availability

The data associated with this publication are not available for this reason: N/A

Medical Mentorship Deconstructed: An Analysis and Structural Recommendation for High Value Mentorship

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Introduction

Despite medical school admissions increasing, the numbers of prospective doctors are not enough to address the physician shortage, especially in rural areas. Many of these rural areas, such as California's San Joaquin Valley (SJV), are impacted by the lack of interest in primary care, aging practitioners, and various other factors; leading to higher rates of death, disability, and chronic disease when compared to urban populations. An important aspect of increasing medical students and physician training from rural areas is utilizing mentorship to foster a continuous supply of rural medical students who plan to serve their communities and residents who decide to remain in rural areas after training.

Mentorship in medicine is not a new concept, with many studies showing that mentorship results in benefits for both the mentee and the mentor. Junior physicians who received mentorship were found to have increased skill development, job satisfaction, and career development while mentors who partook in mentorship programs also reported higher job satisfaction and increase in retention at their current institutions. Of all the obstacles that physicians experienced in their pursuit of receiving mentorship, access to health professionals who could serve as potential mentors, was listed as the most common and difficult barrier to overcome; with factors such as race and gender not significantly affecting the level of satisfaction of those who received mentorship.

Although there are previous studies on the impact of mentorship including: 1) retention/supplementation of rural physicians and 2) the importance of mentorship for residents and practicing physicians, studies on high value mentorship for premedical students are lacking. Furthermore, the literature fails to describe best practices on developing and sustaining mentoring relationships. Previously, scholars in the field have described the skills and characteristics of effective mentors. Nonetheless, the topic of mentorship in medicine still remains a contested topic as to the critical time periods for mentorship.

Study Goals

This study targeted current medical students and aimed to examine how the mentorship they had experienced impacted their path to medicine. Specifically, this study looks at what aspects of previous mentorship participants considered valuable and successful within different time periods of their medical school trajectory, with the ultimate goal being to inform best practices for the development of a high value mentorship program to benefit the future of premedical students in the region.

- Aspects of previous mentorship experiences participants considered valuable/successful
- Barriers towards accessing mentorship
- Design best practices for high-value mentorship

Study Design

This study consisted of structured interviews with ten current medical students. Questions were designed to elicit various experiences respondents had with mentoring; however they chose to define the term, including their opinions on mentorship program design. Ten interviews were conducted by medical students participating in a summer program known as UC Davis Research, Education, and Community Health after the first year of medical school. This program connected medical students with clinical and community service engagement experiences in the SJV.

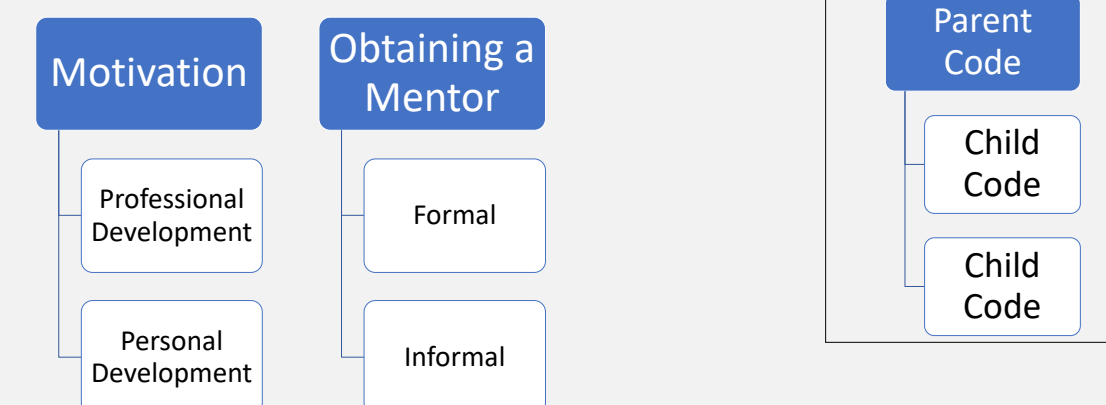
Interviewees were recruited through word-of-mouth, outreach to peers, and networking at a community service event. The sole eligibility criteria was current enrollment in medical school. No demographic data was collected, and interviews were de-identified. Consent was obtained individually prior to the interview. Interviews were conducted by phone, by video call, or in person. The interviews were conducted and transcribed verbatim.

Data Analysis

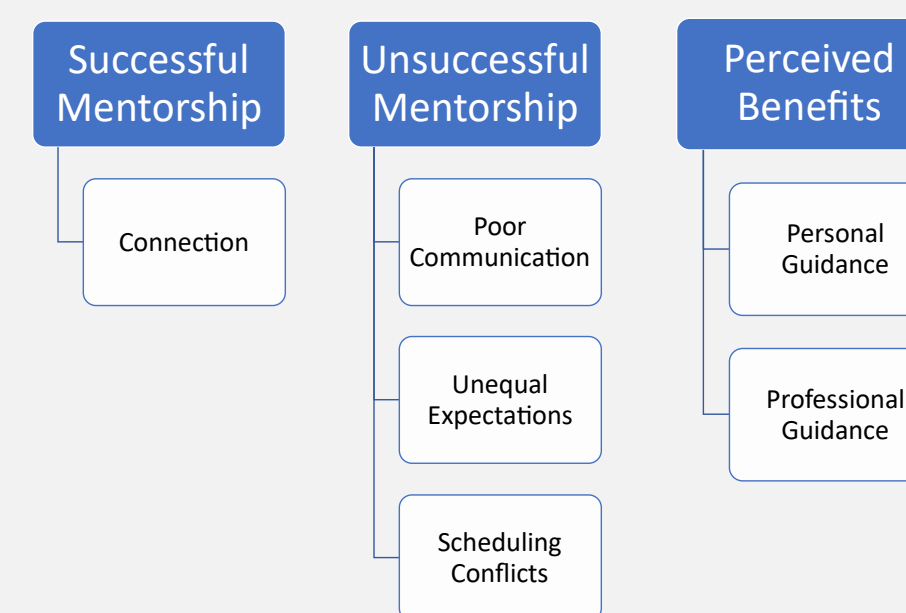
The research team coded the data using a combination of deductive and inductive methods to analyze the data for patterns in participants' experiences. Each research member created a coding framework of the data and the research team jointly determined the coded findings. The initial set of codes were derived from the study's research questions and supplemented with inductively-derived codes that emerged. Through an iterative coding process, then discussing as a research team, a codebook was developed. Joint coding was used both initially while the research team established an initial coding scheme, and periodically thereafter to ensure continued intra- and inter-coder reliability. Data was also cross-coded, with one team member coding data initially coded by another team member. Any discrepancies were discussed and reconciled at regular research team meetings. Thematic analysis was conducted alongside the coding process.

Results

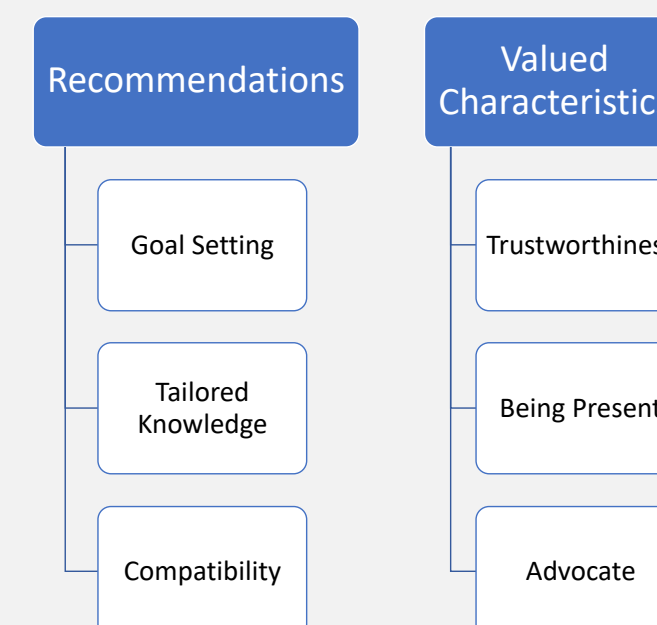
Before Obtaining a Mentor



During the Mentorship Relationship



After Receiving Mentorship

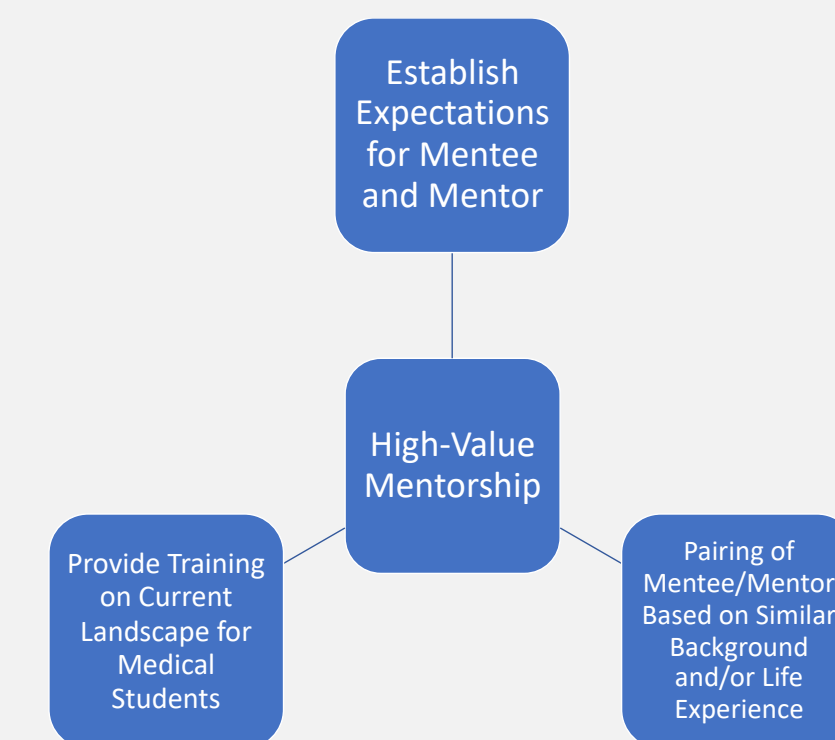


Discussion

This study's findings revealed a deeper look into what students considered successful and satisfying versus unsuccessful aspects of their mentorship relationships during different time periods of their trajectory. Students found satisfaction and success in having close, open, and honest communication with their mentor, with reliable access, and a relationship of affirmation and role-modeling. That role-modeling stemmed from either shared community or even practicing or living in ways considered desirable to the mentee. Concerning unsuccessful aspects, students found large institutional barriers, lack of formal time commitment, and differences in personality, identity, and career to be particularly detrimental. However, the most significant findings of this study were within the "After Receiving Mentorship," including what students, in reflection, would have done or liked to see differently, as well as suggestions for future mentorship relationships.

Within the "After Receiving Mentorship," students articulated the importance of opportunity, communication, and compatibility. Opportunities included those for success on the medical path while recommendations on communication were more nuanced. Students felt communication between mentor and mentee ought to include clear expectations, as well as up to date knowledge, supportive honesty, and open approachability. Compatibility was emphasized, both personally and professionally, with one mentee even suggesting a measure of fit survey. Ultimately, these findings reveal the importance in being able to identify with the mentor and having a formal, structured program in place to help establish and strengthen the mentorship relationship.

Recommendations



Through the implementation of these components we can increase the efficacy of mentor/mentee relationships and provide longer lasting relationships. Although there is an initial time intensive incorporation period that will have to occur in order to develop such a structure, the benefit to the mentee and mentor is exponentially increased. With access to mentorship programs already being a significant barrier to many mentees, we must ensure that once they are able to obtain formal mentorship, that the program is able to reward their efforts by providing a robust mentorship curriculum and structure.

Limitations

The study includes a small sample size of medical students in a rural region. Future research should include a larger sample size and should consider taking a quantitative approach to measuring satisfaction and outcomes of mentorship experiences.