

Implementation of Compulsory Mentorship Program in the Present Medical Education Scenario-Benefits and Challenges

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How to cite this article:

Padmini Hannah Noone. Implementation of compulsory mentorship program in the present medical education scenario-Benefits and challenges. *Ind. Jr. of Legal Med.* 2023;4(1-2): 25-26.

Abstract

Mentoring in medical education has been going on globally over a long period of time. It has its own challenges and advantages. Since in the present day scenario the NMC has made it mandatory to implement mentoring, the challenge is now of handling a mandatory mentorship program. This review article explores the views and various aspects in relation to mentoring. The conclusions seen are that mentoring is shown to be beneficial to both the mentees and mentors. However certain impediments like time constraints, difficulty in opening up, confidentiality may hinder its effectiveness. Peer assisted mentoring and use of exploratory sessions to find their specific needs can help in improving the quality of mentoring.

Keywords: Mentoring; Medical education; Compulsory; Professional satisfaction; Guidance, Exploratory session; Peer Assisted Mentoring.

INTRODUCTION

Mentoring in medical education has been going on in many countries in many ways. There are many advantages of conducting the mentorship program. However, that is also not without challenges. This narrative review attempts to explore the various aspects of mentorship with an aim to find an effective way of mentoring. This becomes relevant in the present day since NMC guidelines mandate mentorship for undergraduates to be conducted compulsorily.

DEFINITION

Mentoring is defined by the Cambridge Dictionary as the act or process of helping and

giving advice to a younger or less experienced person, especially in a job or at school¹ and a commonly accepted definition is "A process whereby an experienced, highly regarded, empathetic person (the mentor) guides another (usually younger) individual (the mentee) in the development and re-examination of their own ideas, learning, and personal and professional development."²

TYPES AND BENEFITS

The medical course is a stressful one. The mentorship program is an attempt to make sure that every student has someone to guide them in their adjustment phase and also in their career pathway. The mentors' expertise may help the mentee in professional growth, this may help the mentee in the form of professional coach, role model and support system.³ Mentorship has been proven to be beneficial to improve job satisfaction and can help in steering the younger generation into the right path.⁴ The mentors also gain from professional satisfaction and improvement in communication skills.⁵

There are two broad categories of mentorship: traditional and transformational. There are four

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Received on: 27.03.2024 **Accepted on:** 10.05.2024



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subtypes within each of those areas: formal, informal, spot, or peer.⁴ Group based mentorship programs have been included in medical education. A systematic review on 17 articles showed results in favour of group mentorship. They found that it helps in mitigating the stressors in medical education and longitudinal and integrated mentorship helps in psychosocial development.⁵ Even in resource limited settings it has been found to be beneficial for overall development.⁶ According to Tan et al a small group number (5 to 8 mentees) is ideal for personal development and a larger group would benefit in professional development.⁷

CHALLENGES

The challenges described in literature includes poor student attendance, doubts in their expectations, additional burden to work. Some mentees on the other hand felt that the confidentiality and respect in groups were compromised.⁸ Finding an appropriate time to meet has also been described as a challenge.⁹

NECESSARY OR NOT

Mandatory group meetings have been recommended since it ensures that the mentorship activity is not submerged within the teaching schedule. Neer peer method is in fact found to be successful and a senior student as a second mentor is in fact recommended to be helpful in successful implementation.⁵ In a study reported from India regarding first year mentoring, Over 95% of respondents felt it was a good idea.⁹ A thematic analysis with Focussed group discussion showed that there is a consensus among students that the mentorship program is essential, the current operational framework still has limited confidence due to biases, fears, and misinformation among the students. This means that their specific needs have to be addressed for making it successful.¹⁰

CONCLUSION

From the discussion it is seen that most mentees are actually in favour of the mentorship program. Mentorship has been proven to be helpful to the mentees in the long run especially if its longitudinally integrated. The mentors are also to benefit in the form of professional satisfaction and psychosocial skill development. The mentors may find it difficult because students may not turn up, or it is difficult to find the right time in an already burdened work schedule. The students on the other

hand may not open up due to fear, or confidentiality issues. Using peers as assistants may help in some aspects since they may relate to the juniors more. Exploratory sessions to know their specific needs and follow up may be necessary for the successful implementation of the program.

REFERENCES

1. Mentoring. Accessed from https://dictionary.cambridge.org/dictionary/english/mentoring#google_vignette on 9-3-24
2. Oxley J, Standing Committee on Postgraduate Medical and Dental Education. Supporting doctors and dentists at work: an enquiry into mentoring. London: SCOPME; 1998.
3. American Psychological Association. Introduction to Mentoring: A Guide for Mentors and Mentees. Accessed from <https://www.apa.org/education-career/grad/mentoring> on 9-3-24
4. Cooke KJ, Patt DA, Prabhu RS. The Road of Mentorship. *Am Soc Clin Oncol Educ Book*. 2017;37:788-792. doi: 10.1200/EDBK_175193. PMID: 28561670.
5. Skjevik, E.P., Boudreau, J.D., Ringberg, U. et al. Group mentorship for undergraduate medical students—a systematic review. *Perspect Med Educ*. 2020;9:272–280. <https://doi.org/10.1007/s40037-020-00610-3>
6. Mremi A, Pancras G, Mrema D, Morris B, Mwakyandile T, Msanga DR, Mundamshimu JS, Nicholas B, Massawe HH, Matiko M, Amour M, Malindisa E. Mentorship of young researchers in resource-limited settings: experiences of the mentees from selected health sciences Universities in Tanzania. *BMC Med Educ*. 2023 May 24;23(1):375. doi: 10.1186/s12909-023-04369-z. PMID: 37226151; PMCID: PMC10206589.
7. Tan YS, Teo SWA, Pei Y, Sng JH, Yap HW, Toh YP, et al. A framework for mentoring of medical students: thematic analysis of mentoring programmes between 2000 and 2015. *Adv Health Sci Educ Theory Pract*. 2018;23(4):671–97
8. Goncalves MCN, Bellodi PL. Mentors also need support: A study on their difficulties and resources in medical schools. *Sao Paulo Med J*. 2012;130(4):252–8.
9. Bhatia A, Singh N, Dhaliwal U. Mentoring for first year medical students: humanising medical education. *Indian J Med Ethics*. 2013;10(2):100–3
10. Panigrahi SK, Naik G, Padhy GK, Mondal H, Bhattacharya S. Need Assessment of Existing Mentorship Program Among Undergraduate Medical Students: Experience From a Medical College in Chhattisgarh, India. *Cureus*. 2023 Oct 21;15(10):e47413. doi: 10.7759/cureus.47413. PMID: 38022138; PMCID: PMC10658214.