


The Value of Peer Mentoring: Transforming the First-Year Medical Student Experience [Letter]

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Dear editor

I read with great interest the article by Alobaid et al,¹ which offers valuable insights into the concept of a peer mentoring program for first-year medical students. The study highlights benefits such as reduced stress levels, increased self-confidence, improved academic outcomes and the development of essential interpersonal skills. This letter aims to constructively address certain aspects of the study from the perspective of a recent UK medical graduate.

A significant limitation in the study's methodology is the absence of a control group of students, who did not participate in the mentoring program. Without comparing the outcomes of the participants and non-participants, it is difficult to determine whether these improvements in stress reduction, self-confidence and academic performance are directly attributable to the Big Sibling program. External confounding factors, such as pre-existing support networks, may have also contributed to these observed benefits. Incorporating a control group, would enhance the study's internal validity and more definitively attribute these benefits to the program. Indeed, Akinla et al² emphasizes the importance of a control group when evaluating a peer mentoring program's true impact.

Secondly, the study evaluated the program after only one semester, focusing on short-term outcomes rather than its long-term impacts. This may not be sufficient time for students to fully develop interpersonal skills or show lasting changes in psychosocial behaviour and academic performance. Extending the study's time frame could provide a more comprehensive understanding of the program's long-term effects on professional development and emotional well-being.² Nimmons et al³ supports this, emphasizing the importance of longitudinal follow-up studies when evaluating a mentoring program's lasting impact and success.

The short study duration may inhibit the development of trusting relationships between mentors and mentees, which is vital in determining the quality of educational support. Without sufficient time to cultivate this connection, the relationship quality could diminish, potentially skewing the program's outcomes. Extending the study's time frame would allow these relationships to flourish, fostering increased psychological safety, stronger personal connections and a more thorough representation of the program's impact on personal well-being.⁴

Lastly, the mentor selection criteria focussed heavily on academic performance, potentially overlooking other personal attributes necessary for holistic mentorship. An effective mentor not only excels academically but exhibits diverse interpersonal skills that provide effective psychological support for mentees. Heirdsfield et al⁵ found that including qualities such as emotional intelligence, empathy and communication skills into the mentor selection criteria, fostered deeper mentor-mentee relationships and a more successful mentoring program.

By incorporating these skills into the mentor selection criteria, the program could provide more enriching support systems for students. Implementing formal selection processes such as standardized interviews or self-assessment portfolios would help assess these skills and create a more balanced mentor profile.⁵

In conclusion, the author presents a commendable peer mentoring program that offers promising benefits for first-year medical students. However, implementing these suggestions could strengthen the study's validity and provide a more

comprehensive reflection of the program's impact on students' emotional well-being, academic performance and overall university experience.

Disclosure

The author declares no conflicts of interest in this communication.

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