Introducing Mentoring to 1st-year Medical Students of a Private Medical College in North India: A Pilot Study

Abstract

Background: The stress of complex medical course, emotional immaturity, and adaptations to new surroundings are the challenges faced by the new medical entrants. Therefore, mentorship program was introduced to support them for their academic and personal development. Aim and Objectives: The aim of this study is to introduce and to assess the perception of mentors and mentees on mentorship program. Materials and Methods: A mentorship program was designed for Bachelor of Medicine and Bachelor of Surgery (MBBS) First Professional students. A 1-day workshop was conducted to sensitize the faculty. Seventeen faculty members from various departments volunteered to be mentors. After sensitization, 150 MBBS First Professional students were divided among these faculty members by lottery system. A regular visit of mentees was scheduled with the mentor. At the end of mentorship program, the perception of mentors and mentees was taken using a validated and semi-structured feedback questionnaire. A focus group discussion of students was also conducted. Results: A total of 112 students and 16 faculty members completed the feedback questionnaire. The mentors considered this program helpful in their self-improvement, teaching, and communication skills. Most of the mentees felt that this program helped them emotionally and academically. It was a good way to develop a strong student-teacher relationship. All the mentors and mentees were satisfied with the mentorship program. Conclusions: The newly introduced mentorship program helped in the overall development of mentors and mentees. Both mentors and mentees were extremely satisfied with this program and considered this as a successful intervention.

Keywords: Medical students, mentee, mentor, mentorship program

Introduction

Effective academic and psychological support is one of the pivotal factors that contribute to the students' success in pursuing higher professional degree programs.[1] Mentoring program medical schools exist to provide support to students and guidance that contribute to a fulfilling undergraduate medical experience.[2] This program facilitates the students in academic pursuit and provides them a way to cope up with the difficulties faced in new environment.[3] The benefits of mentoring may be seen in three major domains of the institution: the mentees, the mentors, and the medical school community. The benefits offered by this program to mentees are related to their career development; it enlightens their interest in research and inspires them to improve their academic performance. It further helps them emotionally and reduces their stress by improving their relationship

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with the mentors. The mentors are also benefitted as this program provides a sense of internal satisfaction, improves their teaching skills, and thus helps in personal development. In addition, the medical school community is also benefitted, as it improves clinical care, research as well as teaching.^[4] Therefore, this study was designed to introduce and assess the perception of mentees and mentors regarding mentorship program.

Materials and Methods

The project was carried out with the Bachelor of Medicine and Bachelor of Surgery (MBBS) first professional students. The Principal, senior faculty of various members of departments. curriculum committee, and medical education unit (MEU) were sensitized by organizing a 1-day workshop on mentorship program. Feedback questionnaire was taken after the workshop. After much deliberation, the mentorship program was developed by

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Table 1: Mean response of closed-ended questions given by mentees

Questions	Mean±SD	Median
My mentor is available and accessible to me	4.34±0.89	5.00
My mentor communicates regularly with me	3.72 ± 1.02	4.00
My mentor is supportive	4.38 ± 0.71	4.00
My mentor encourages and motivates me	4.36 ± 0.68	4.00
My mentor supports me emotionally	4.02 ± 0.85	4.00
My mentor suggests appropriate recourses and ideas to improve my studies	4.20 ± 0.79	4.00
I will keep in touch with my mentor for my future personal and professional development activities	4.13 ± 0.75	4.00
I want to continue with the same mentor for the next session	4.09 ± 1.05	4.00
My mentor has motivated me for peer mentoring	3.56 ± 1.01	4.00
I will volunteer for peer mentoring	3.72 ± 1.00	4.00
Mentorship program is needed for welfare of the students	4.48 ± 0.64	5.00

^{*}Likert scale used was: Strongly agree: 5, Agree: 4, Neither yes nor no: 3, Disagree: 2, Strongly disagree: 1; SD: Standard deviation

Table 2: Perception of mentees on mentorship program – closed-ended questions (*n*=112)

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Questions	Strongly	Agree (%)	Neither agree	Disagree (%)	Strongly
	agree (%)		nor disagree (%)		disagree (%)
My mentor is accessible to me	53.57	34.82	3.57	8.04	0
My mentor is available to me	21.43	48.22	12.5	16.96	0.89
My mentor communicates regularly with me	49.11	41.07	8.03	1.79	0
My mentor motivates me for curricular activities	46.43	43.75	8.93	0.89	0
My mentors supports me emotionally	31.25	44.64	18.75	5.36	0
My mentor suggests appropriate resources and ideas to improve my studies	37.5	49.11	9.82	2.68	0.89
I will keep in touch with my mentor for my future personal and professional development	32.14	50.89	14.29	2.68	0
I want to continue with the same mentor for the next session	46.43	27.68	16.07	8.03	1.79
My mentor has motivated me for peer mentoring	18.75	37.5	25.89	16.97	0.89
I will volunteer for peer mentoring	20.54	46.43	21.43	8.03	3.57
Mentorship program is needed for the welfare of the students	55.36	38.39	5.36	0.89	0

Table 3: Perception of mentees on mentorship program – open-ended questions (n=112)

Questions	Responses	Percentage
Two things you like about the mentorship program	Interactive	2.19
	Problems can be discussed with teachers	42.62
	Emotional support	21.31
	Build confidence	12.02
	Helpful in studies	13.66
	Builds strong teacher-student relationship	7.10
	Hostel issues	1.09
Two things you would like to improve about the mentorship program	Action taken to solve the problem	4.67
	Dedicated time for mentorship program	55.14
	One-to-one mentoring	10.28
	Friendly environment should be there in mentor and mentee	16.82
	Clinical teachers should not be a mentor	8.41
	Peer mentoring	4.67
Overall evaluation of mentorship program	Excellent	55.75
	Very good	24.78
	Good	19.47
	Average	0.00
	Not good	0.00

the members of MEU Seventeen faculty members from clinical, pre-, and paraclinical departments volunteered to

be a part of this program. One hundred and fifty 1st year students were divided among 17 faculty members by lottery

system. The mentees mentor meetings were compulsory visits which were held twice a month. Some mentees also contacted their mentors with contexts other than regular mentor meetings. The log books were maintained and there was a periodic review meeting of the mentors every 15 days with the coordinator of MEU and the Principal. Various issues were discussed in the meeting, and the solutions were also offered.

Table 4: Mean response of closed-ended questions given by mentors

Questions	Mean±SD	Median
Mentorship program promotes better	4.83±0.39	5.00
teacher-student relationship		
My mentee communicates regularly with me	3.92 ± 0.29	4.00
I anticipate an extended future relationship	4.33 ± 0.49	4.00
with my mentee		
Mentorship program is an extra burden on me	1.58 ± 0.67	1.50
I would like to volunteer as a mentor for	4.58 ± 0.67	5.00
future batches		

Questionnaire development

The feedback questionnaires of both mentors and mentees were constructed by reviewing the literature with more emphasis on the areas of mentorship program. The questions were reviewed and revised through a series of collaborative discussions among the authors. There were both open-ended as well as closed-ended questions, which were validated by members of MEU and by external sources.

Collection of feedback

After 6 months of introduction of mentorship program, the questionnaire-based feedback was collected from the mentees and mentors. The feedback based on focus group discussion (FGD) was also collected from 12 mentees, who were selected using random number generator of SPSS Statistics for Windows, Version 17.0 (Chicago: SPSS Inc.).

Statistical analysis

The data was statistically analyzed using SPSS software version 17.0. The outcome of the program was assessed

Table 5: Perception of mentors on mentorship program – closed-ended questions (n=16)					
Questions	Strongly agree (%)	Agree (%)	Neither agree nor disagree (%)	Disagree (%)	Strongly disagree (%)
Mentorship program promotes better teacher-student relationship	83.33	16.67	0	0	0
My mentee communicates regularly with me	0	91.67	8.33	0	0
I anticipate an extended future relationship with my mentee	33.33	66.67	0	0	0
Mentorship program is an extra burden on me	0	0	8.33	41.67	50
I would like to volunteer as a mentor for future batches	66.67	25	8.33	0	0

Questions	Responses	Percentage
What is going well in the mentorship program?	Students get comfortable and confident	21.88
	Students discuss problems	28.13
	Increases focus on studies	12.50
	Strong teacher-student relation	21.88
	Satisfaction to help	9.38
	Self-improvement	6.25
What challenges have you confronted in the mentorship	No dedicated time	22.73
program?	Hesitation to discuss problems	45.45
	Time taken to build confidence with mentees	31.82
What are the changes you identified in yourself as a	Self-satisfaction	17.24
result of this mentorship program	Better understanding or empathy	37.93
	Increased communication skills	31.03
	Increased teaching skills	13.79
Any other suggestions	Same mentees throughout academic tenure	10
	Regular feedback	30
	Dedicated time	30
	Mentees must be properly sensitized	30
Overall evaluation of mentorship program	Excellent	41.67
	Very good	25.00
	Good	33.33
	Average	0.00
	Not good	0.00

Table 7: Items	identified	through	content	analysis of
	focus grou	up discus	sion	

	focus group discussion
Factor	Item
Need for a	Coming from a nonmedical background, I
mentor at the time of joining	was lost initially as I could not take guidance from my family also
the institute	Even though I am not a hosteller, I needed someone to guide me
	Initially, I had hostel problems and I was homesick, so needed help
	I needed a mentor to cope up with social and cultural differences
	I had a mentor in my previous classes so wanted one who could give me guidance for my studies
Acceptability of the allotment	I am happy with the allotment of mentors through lottery system.
method	I wanted to be with the mentor of my choice
Benefits of the mentorship	I could openly discuss my problems with my mentor be it personal or professional
program	I could get guidance from my mentor for some issues which I could not discuss with my parents
	My mentor offered me carrier counseling
	It helped me to develop a better relationship with my mentor
	My mentor helped me regarding preparation of subjective questions as we were more oriented toward objective questions
	My mentor was like a second mother to me
	My mentor helped me overcome my inferiority complex, I had regarding my looks
	My mentor helped me with time management during my final exams
	My mentor helped me to cope up with the stress of final exams
Any suggestions	There should be a dedicated time for mentoring
for improvement	One-to-one mentoring should be there
	Mentor should call me more frequently
	I want to be with the same mentor
	I was initially uncomfortable with the mentor of higher classes
	My mentor from clinical department did not give me enough time
Views regarding peer mentoring	We want to volunteer for peer mentoring
Satisfaction from	Satisfied with the mentorship program, want
this program	to continue with the same mentor in our next class also
	Want to have a mentor from the same professional year

by validated semi-structured questionnaires which were collected from both the mentors and mentees. Cronbach's alpha coefficient test was used to assess the validity and reliability of the questionnaire collected from the mentees. The value of Cronbach's alpha was 0.86, thus, representing that the questionnaire was good in content. The mean and the standard deviation of the data was analyzed statistically. The median scores for individual items of the questionnaire were also calculated. Descriptive analysis was done for qualitative data.

Output and Results

Mentorship program was introduced in 1st-year MBBS students. Out of 150 First Professional MBBS students of either sex who participated in the mentorship program, 112 undertook the feedback questionnaire. The remaining students were absent on the day of collection of the feedback form [Tables 1-3].

Out of the 17 faculty members who volunteered to be a part of mentorship program, 16 faculty members completed the feedback questionnaire. One faculty was on long leave, and therefore, was not able to complete the form [Tables 4-6].

Two sessions of FGD were carried out involving 6 students in each session, 14 items were identified [Table 7].

Discussion

Mentoring is an ancient notion that dates to Greek mythology. First-year medical students come from a secure environment of the school with less number of students in each class, having spent time with the students of the same social and cultural backgrounds. When they enter a medical college, they get lost in the crowd with too many students in the same class coming from different backgrounds; these students face stress of complex medical course, peer pressure, and emotional immaturity. Therefore, it is the need of the hour to intervene and introduce mentorship program to this vulnerable group.^[5]

This study tried to introduce mentorship program in 1st year and assess the perception of the mentees and mentors on this program. The findings suggest that the mentees felt supported in terms of their personal development and were also motivated to improve their academic performance. This finding was in accordance to the study by Kalén *et al.*^[6] who reported that having a mentor was a positive experience for most students in terms of both professional and personal development.

Majority of mentors and the mentees reported that mentorship program improved the communication between them, which helped the mentees to discuss their problems with the mentors in a nonthreatening environment, similar findings were reported by Usmani *et al.*^[7] who reported that mentees and mentors became friendlier which allows mentees to discuss their issues easily.

Mentors reported that this program gave them a feeling of self-satisfaction; they also could improve their teaching methods due to the feedback they were receiving from their mentees. They also stated that they could understand the problems faced by the students; this helped them to develop more empathy for the students. Similar findings were reported by Arati Bhatia *et al.*^[3] who stated that mentors become aware of the students' problems and were able to empathize better.

In focused group discussion, one mentee stated that "my mentor is like second mother to me," some stated that their mentor helped them to overcome their inferiority complex, thus the mentors were providing them with emotional support. This program helped in building up a healthier teacher—student relationship.

The limitations of the present study were that the mentorship program could not be introduced at the start of the session; therefore, the students wanted to have mentors of their choice and they were uncomfortable with mentors of the higher classes. Furthermore, we could not get a dedicated time slot for mentorship program in the timetable, so both mentors and mentees had difficulty in setting up the meetings.

To conclude, the mentorship program was introduced in 1st-year MBBS students. Teaching skill of mentors improved through this program, and this program helped to build up a better student—teacher relationship. An empathetic point of view was developed in mentors regarding the problems faced by the mentees. This program paved the path for peer mentoring in the future so that the new batches would acclimatize to the new environment. Both the mentors and mentees were satisfied with the mentorship program.

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Conflicts of interest

There are no conflicts of interest.

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