

# Perception of Undergraduate Medical Students Regarding Mentorship in Medical Education

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## ABSTRACT

**Introduction:** Although there is a definite need of mentorship in medical education, there is lack of well organised mentorship program in medical institutions in our country. It is essential to identify the perception of medical undergraduates regarding mentorship.

**Aim:** To assess the student's perception regarding mentoring at different stages of their studies.

**Materials and Methods:** A Questionnaire based observational study was carried out on second year MBBS regular batch students. Enrollment of the students for study was purely on voluntary basis after taking informed consent. All the study participants were given 30 minutes for filling of questionnaire which was predesigned, structured and validated. The collected data were entered in Microsoft excel and analysed accordingly.

**Results:** A total of 203 students participated in the study. Out of these, 173 (85.2%) students felt that mentorship is guiding

the students. About 81 students (39.9%) strongly agreed that mentorship is a relationship rather than set of activities. About 198 students (98%) felt that there is a definite need of mentorship in medical education. About 151 students (74.4%) felt that contact session with mentor should be done as and when required but definitely more before exam. About 181 students (89.6%) felt comfortable if mentor had expectations from them.

**Conclusion:** Almost all students perceived that there is definite need of mentorship in medical education with subject expertise; availability and nature of mentor were given priority in choosing mentor. Perception regarding frequency and place of meeting for mentorship varied widely among students. Through this study we came to know about the perception of medical undergraduates which will be helpful to identify their expectations from the mentor.

**Keywords:** Counseling, Knowledge, Mentor, Perception, Questionnaire

## INTRODUCTION

The concept of mentoring dates back in the era of Greek mythology Odysseus who gave the responsibility of his baby boy Telemachus to the Goddess of wisdom Athena. It was Athena's constant mentoring that transformed Telemachus into a successful warrior [1-3]. Medical education has witnessed informal mentoring practice since years of its existence. But it was officially formalised in late 1990's when mentoring was adopted for medical students in US as a formal regular practice [4]. It is one of the building blocks of the medical education which blossoms into a mutual beneficial relationship between mentor and mentee [5]. Medical students need mentoring at different stages of their studies in a different way [6]. As the student matures, the need shifts to the career counseling, speciality selection and research guidance. In majority of the medical colleges in India, there is no definite standard operating procedure regarding the functioning of mentorship cell. Faculties do counsel the students when the students consult them but it is not structured, preplanned and defined. This validates a study in depth to find the loopholes and then mend them accordingly.

Mentor has to play various roles in medical education over and above the teacher like counsellor, supervisor and many more and to fulfil these different roles, there is a definite need of developing relationship [7,8]. Author has noticed wider variation in the meaning and henceforth the role of mentor. The meaning ranges from: (a) a mentor is someone who can answer questions and give advice; (b) who shares what it means to be a doctor; (c) a mentor is someone who listens and stimulates reflection. The way the mentors understood their role, also affected what they did as mentors, their relationships with their mentees and their perceived benefits as mentors [9]. Hence, present study has been designed with the aim to assess the student's perception regarding mentoring at different stages of their studies.

## MATERIALS AND METHODS

A questionnaire based observational study was conducted after the approval of Central Research Committee (Approval no: GMERS/MCG/CRC/12/2017; (Dt.: 08/02/2017) and Institutional Ethics Committee (Approval no.: GMERS/MCG/IEC/29/2017; (Dt.: 09/03/2017). Data collection was done between March 2018 to July 2018. Questionnaire regarding the perception of the mentorship programme by medical undergraduates was prepared. It was having 14 close ended questions, 3 close ended questions with one option in which study participants can answer any other choice in detail, one open ended question in which study participants can write his/her any other expectations from mentor in detail and one likert type question in which study participant selected any one between 0 to 5. This predesigned structured questionnaire was validated by two subject experts from this institute and two subject experts from other institutes. Study participants were second year MBBS students of all batches and they were clearly informed about the voluntariness of the study participation and enrolled in the study only after obtaining informed consent. The primary reason for conducting this study in second year MBBS students was as they had already cleared first year MBBS, hence they were considered to be appropriate study participants for the objectives of the study as they must have developed some perception regarding the need, pattern, advantages and disadvantages of mentorship based on their experience of first year MBBS. Details of the study including need, objectives and execution of the study were instructed in detail in pharmacology lecture class. Study was conducted during their third term with special care regarding the timing of the study i.e., there was no theory or practical examination within period of 15 days after the study. After taking informed consent, questionnaire was given to each study participant and 30 minutes were given to fill up the questionnaire. Study participants were also allowed to ask if they have any query regarding the understanding of study. Details of the questionnaire were depicted in annexure. The same study procedure was followed in all the three batches of second year

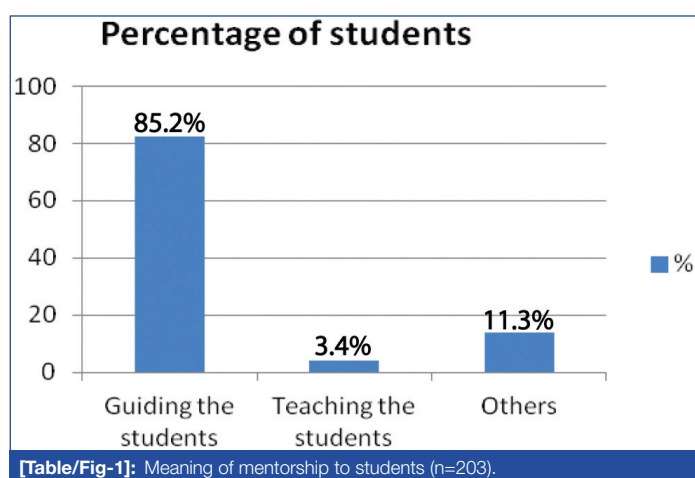
MBBS in time period of one week. Questionnaire was given in their pharmacology teaching schedule only and data collection was done in one week.

### STATISTICAL ANALYSIS

After data collection answers of the questionnaire were analysed in number and percentage, while one question regarding the criteria for choosing mentor median score was obtained.

### RESULTS

A total of 203 students of regular batch of second MBBS professional year were included in the study. Out of total 203 students, majority of students, 173 (85.2%), perceived that mentorship means guiding the students rather than simply teaching the students as perceived by only 7 (3.4%) students, and the question has one other option in which if study participants felt any other meaning of the mentorship, they can write. These included mentorship doesn't just confined to the academic activities, it is a building of relationship, help the students in every aspect of their student life, mutual interaction, making a good human being, shows real path for the study of the students [Table/Fig-1].



While evaluating the perception of students for mentorship as relationship rather than set of activity, 81 (39.9%) were strongly agreed, 92 (45.3%) were agreed, 19 (9.4%) were neutral, 04 (2%) were disagreed and 07 (3.4%) did not answered the question.

Perception of students for requirement of mentorship in medical education was positive in 198 students (98%) while only 2 students perception was negative in regards to the requirement of mentorship in medical education. Another 3 students perceived that mentorship is required if needed and not for all students. But at the same time while answering the question that whether mentorship should be required for all students or those who voluntarily agreed to participate, 127 students (62.56%) felt that mentorship should not be compulsory for all students but for those who voluntarily agree to participate in this activity.

A total of 106 (52.5%) students felt that mentor should take initiative, 76 students (37.6%) felt that mentee should take initiative, while 16 students felt that both mentor and mentee should take initiative for mentorship in medical education. Five students didn't answer this question.

Among the determining criteria for the selection of mentor, expertise in subject was selected by 191 (94.9%) students, availability of mentor by 177 (87.2%) students and nature of mentor by 182 (89.6%) students. Amidst these individual selection criteria, students were asked to quantify the degree of requirement of determining criteria for selection of mentor on the scale of 0 to 5 (0-not required, 5-strongly required). Hence even though all the above mentioned three criteria were considered to be determining criteria for selection of mentor by students, subject expertise and nature of mentor were strongly required as compared to availability of mentor [Table/Fig-2].

Criteria for mentor	Median score	Q1	Q3
Subject expertise (n=191)	5	4	5
Availability of mentor (n=177)	4	3	5
Nature of mentor (n=182)	5	5	5

[Table/Fig-2]: Criteria for choosing mentor (scale of 0 to 5).

A total of 52 students (25.6%) were agreed while the rest were disagreed for the statement that mentor should guide only academic issues. Perception regarding the availability of different mentors for different subjects and frequency and timing of contact session were depicted in [Table/Fig-3]. A total of 138 (68.7%) students felt the requirement of different mentor for different study subjects. Majority of the students, 151 (74.4%) felt that contact session with the mentor should not be predetermined and it should be on the basis of requirement. A definite need of more contact sessions before exam was reported by 161 students (80.5%). While answering the question regarding the preference of selection of mentors, 173 students (85.22%) felt that preference regarding the selection of mentor should be given to the students, while 27 students (13.30%) felt that there should not be any preference and there should be predefined division.

Perception of mentor and contact session	Response	Number (%)
Different mentor for different subjects (n=201)*	Agree	138 (68.7%)
	Disagree	63 (31.3%)
Contact session with mentor (n=203)	At predefined time	52 (25.6%)
	As and when required	151 (74.4%)
More contact session before exam (n=200)*	Yes	161 (80.5%)
	No	39 (19.5%)
Frequency of contact session (n=201)*	Once a week	85 (42.3%)
	Once in two weeks	26 (12.9%)
	Once a month	14 (7%)
	Others	76 (37.8%)
Feel comfortable if mentor is having expectation from students (n=202)	Yes	181 (89.6%)
	No	21 (10.4%)

[Table/Fig-3]: Perception regarding mentor for different subjects and contact session.  
\*Remaining students have not answered the question

Regarding the availability of mentor, 78 students (38.42%) felt that mentor should always be available while 125 students (61.58%) felt that mentor should be available as per the predecided time. A total of 91 (44.83%) students felt that mentorship should be done one to one while the rest felt that it should be in a group. Out of the students who felt that mentorship should be done in a group, majority of the students felt that group should be of 2 to 20. Amidst the groups, most preferred one comprises of 5 to 10 (75, 36.94%).

Only 52 (25.6%) students felt that mentors should guide for only academic activities while the rest felt that mentor should also guide in other activities mentioned in [Table/Fig-4], exactly those mentioned by the students.

Expectation from the mentor	Guidance and methodology
Develop professionalism	Motivate the student who is so fearful to talk in general
Help in personal growth	Help make a person more target oriented
Shapen the personality	Self confidence development
Support academic career	Helpful and supportive in everyway
Promote student's interest	Provide mental relaxation in every aspect
Help in personal and day to day problems	Increase confidence
How to live life and how to react	Tell student about their ability
Communication skill development, undertake medical welfare and awareness programme for benefit of public	Honest with them about their status

[Table/Fig-4]: Expectations from Mentor in addition to academics.

## DISCUSSION

The present study was designed to identify the perception of the second year medical undergraduates regarding the mentorship in medical education. Investigator had consulted the Dean of his institute and it was decided that based on the result of this study, institute will plan and structure mentorship program which can work more effectively than existing one for all the MBBS students.

In the present study, majority of the study participants felt that mentoring is essential in medical education. In a study conducted by Fallatah HI et al., 83% of the students indicated that mentoring was important. Academic guidance was the priority expectations from the mentorship programme followed by social and psychological support and lastly career planning [10].

In present study, majority of the students agreed strongly that mentorship is a relationship rather than set of activities (173, 85.2%). In a study conducted by Kukreja S et al., it had been clearly stated that mentorship program is providing emotional support to the mentee and help them to overcome their inferiority complex [11]. The ultimate expected outcome of the mentorship programme is to share knowledge and experience of the mentor to the mentee as well as providing emotional support so that mentee can achieve up to his/her maximum potential [8,12].

In the present study, 85.2% of students felt that mentorship means guiding the students. Other option which was teaching the students was selected by negligible students (3.4%). Majority of the students felt that mentorship should not be restricted for academic issues (74.4%) and should be for overall concerns of the students. It not only includes educational guidance but mentoring also comprises supporting a mentee in coping with stress and in establishing a satisfying work-life balance [13]. Mentoring is a relational process in which five phases can be distinguished: information on career options, developing career plans, focusing on career goals, realisation of career steps, and evaluation of career advancement [14,15].

In this study, subject expertise, nature of mentor and availability of mentor were considered to be the essential criteria for the selection of mentor. Yeung M et al., and Sutkin G et al., had also mentioned that interpersonal skills and knowledge are important attributes of an effective mentor [16,17]. Availability and accessibility of the mentor had been given the highest priority by mentees for the selection of mentor by Kukreja S et al., [11]. Ability to devote enough time was also considered to be the essential quality of an effective mentor [12,18-20]. Garmel GM added to this that to keep one self-approachable, assessable and show enthusiasm to maintain mentor-mentee relationship is very crucial. Timely exposure is essential for the successful outcome of mentorship program [12]. A big chunk of students (138, 68.7%) felt that there should be availability of different mentors for different subjects. Conclusion of various studies regarding this matter is mentors may have one or multiple mentees, and occasionally more than one mentor for a group of mentees [21-27].

In this study, majority of students (161, 80.5%) felt that there should be more contact sessions before exam. Pressure of examinations is considered to be a major problem among medical students [28,29]. Amidst various interventions to relieve the pressure of examinations, mentoring programmes are considered to be one of the useful activities [30].

While evaluating the initiator in mentor-mentee communication, there was nearly equal opinion both for mentor as well as for mentee to take initiative. Studies have shown that the initiative to establish the mentoring process should be taken by the faculty member, but the responsibility to keep it going rests with the mentees [31], who must be proactive so that they get the most out of the relationship [8,32]. While study conducted by Young E et al., stated that the mentee takes ownership of and directs the relationship, letting the mentor know what he or she needs and communicating the way his or her

mentor prefers [33]. The relationship between mentor and mentee can be effectively managed by mentee by well-organised planning and setting of meeting, completing the assigned tasks in stipulated time. This will facilitate the work of mentor and which eventually leads to the successful and satisfying relationship [33].

Majority of students (151, 74.4%) felt that contact session should be conducted as per the need and not at predefined and predecided time. Perception regarding the frequency of contact sessions ranges from once a week, once a two weeks, to once a month. Several previous reports have also documented mentoring meeting frequencies ranging from 2 to 40 meetings per year [24,34,35]. Perceptions of students regarding the frequency of mentor-mentee relationship vary widely. According to Fallatah HI et al., students had a variety of suggestions for mentoring, meeting frequencies ranges from once weekly to once monthly up to once per semester [10]. Timely interaction between mentor and mentee is the key for the successful mentor mentee relationship. Kate MS et al., stated that mentor mentee interaction should occur at least one hour per week [19]. While other researchers stated that frequency of meetings depends on the aim of the particular mentorship program [24,26]. Similarly there are diverse set of opinion regarding the site of meeting i.e., many meetings take place in the clinic or university environment but certain studies emphasised the need of neutral environment (outside the working environment) [36].

### Limitation(s)

The limitation of this study is that, only the perception of second year MBBS students were taken and analysed.

## CONCLUSION(S)

Students perceived mentorship as not just teaching but it's a set of relationship with primary aim to guide the students overall. Almost all students perceived there is a definite need of mentorship in medical education with subject expertise, availability and nature of mentor were given priority contributes for choosing mentor. Perception regarding frequency and place of meeting for mentorship varied widely among students. This can prove to be a useful guiding tool that will not only help the students academically but will also lessen the incidence of mental conflicts and problems. That will be reflected in their better achievement in academic as well as personal level. In future studies, if perception of medical undergraduates from all professionals as well as from different colleges will be taken and analysed then it will give broader and better view regarding the mentorship in medical education which can be rational to apply in medical institutes all over the country.

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**PLAGIARISM CHECKING METHODS:** [Jan H et al.]

- Plagiarism X-checker: Apr 02, 2020
- Manual Googling: Jul 23, 2020
- iThenticate Software: Aug 29, 2020 (11%)

**ETYMOLOGY:** Author Origin**AUTHOR DECLARATION:**

- Financial or Other Competing Interests: None
- Was Ethics Committee Approval obtained for this study? Yes
- Was informed consent obtained from the subjects involved in the study? Yes
- For any images presented appropriate consent has been obtained from the subjects. NA

Date of Submission: **Apr 01, 2020**Date of Peer Review: **May 14, 2020**Date of Acceptance: **Jul 30, 2020**Date of Publishing: **Oct 01, 2020****Annexure: Mentorship perception questionnaire.**

Que No.	Question	Options
1	According to you, mentorship means	Guiding the students
		Teaching the students
		Anything else, please specify_____
2	Mentorship is a relationship rather than a set of activities.	Strongly agree
		Agree
		Neutrally
		Disagree
3	Do you think mentoring is required in medical education?	Yes
		No
4	Mentorship should be required for	All students
		Those who voluntary agree to participate
5	Who should take initiative for this mentor-mentee relationship?	Mentor (faculty members)
		Mentee (students)
6	What would you prefer regarding the selection of your mentor?	Student's choice
		According to predefined division
7	If you are provided with a choice, which factors would you consider while choosing your mentor? Give marks from 0 to 5	Subject expertise
		Availability
		Nature
		Any other_____
		Any other_____

8	What do you think regarding the availability of mentor?	Always available
		Available as per the predecided time
9	Interaction of mentor with mentee (student) should be	One to one
		In a group
10	If in a group, then how many students would you be comfortable with in one group?	Less than 5
		5 to 10
		11 to 15
		16 to 20
		>20
11	Mentor should guide to solve only academic and subject related problems	Agree
		Disagree
12	If mentor should help/guide to solve other issues in addition to academic and subject related problems, which are these issues?	Help in personal growth
		Shapen the personality
		Develop professionalism
		Support academic career
		Promote students' interest in a specialty for which future shortage is projected
		Anything else: _____
13	You require different mentors for different subjects.	Agree
		Disagree
14	Contact session with the mentor should be	As per the predecided time
		As and when required
15	How much time in a month do you expect from a mentor?	Once a week
		Once in two weeks
		Once in three weeks
		Once in month
		Variable
16	Do you require more contact session with mentor before exam?	Yes
		No
17	Would you be comfortable if mentor is having certain expectations from you?	Yes
		No
18	If yes, with which of the following expectations you are comfortable?	Report on stipulated time
		Follow instructions
		Fulfil the duties assigned
19	Any other expectations from mentor, please enlist	