Fostering effective mentorship in psychiatry residency training: Lessons learned from historical black college and university (HBCU)

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Abstract
Introduction: Despite the tremendous benefit of mentorship there is a paucity of formal structured mentoring programs that can be beneficial to the academic environment and for the successful career development among psychiatry residents, particularly for minority physicians.
Objective: The purpose of this study is to describe residents experience with mentorship in a large HBCU psychiatry residency program.
Methods: We reviewed the records of exit interviews for all residents for Howard University psychiatry residency program for a 10-year period between 2008 and 2018.
Results: A total of 55 residents participated in the exit interview. Residents expressed similar opinions about the role of mentorship during the residency training. Although, they described a wide range of experience with mentorship, there was consensus about the important qualities of a mentoring relationship.
Conclusions: Mentoring is believed to be a vital component of a successful residency experience. Residents identified interpersonal relationship and skill building as the most important qualities of a mentor.

Keywords: mentoring, physician burnout, career satisfaction

Introduction

The term ''Mentor'' comes from Homer's Odyssey. Mentor was the wise advisor to Ulysses and was entrusted with the care of his son Telemachus in his absence. In the biomedical training mentorship is a unique and distinctive personal relationship in which more experienced faculty members, clinical supervisors, or professionals serve as trusted advisors and wise people and engage in a variety of interactions with the trainees or junior faculty [1] Mentors act as role models, provide professional expertise, wisdom and political know-how to help their mentees reach their goals and offer an environment conducive to facilitating their aspirations as well as help them make difficult career choices under uncertain and ambiguous situations.

Literature defines mentoring in several ways. According to Pfund, the definition of mentoring is a collaborative relationship that proceeds through purposeful stages over time and has the primary goal of helping mentees acquire the essential competencies needed to succeed in their chosen career [2, 3] McGee pointed out that mentoring also includes using one's own experiences to guide a mentee through a skill requiring intellectual growth and development [4]. Additionally, mentoring is a way for experienced individuals to teach beginners how to develop their career and become a successful professional overall. Mentors are usually people that are experts in their fields and are incredibly skilled at what they do. Generally, on a one-to-one basis, a mentor will devote part of their time towards helping their mentee progress in their line of work, playing a significant role in the transformation of an inexperienced beginner to a highly skilled professional.

Although, mentorship is widely viewed as beneficial during residency for career planning, subspecialty selection and academic career planning [5], a large proportion of residents do not have effective mentoring during residency [6] From the existing research it is not clear whether racial and ethnic minority residents have access to effective mentors or benefit from these relationships in the same manner as their non-minority counterparts. Previous studies have highlighted this inconsistent nature of mentoring. For example, Ginther *et al*. pointed out that White investigators win R01 awards more often than Black and Hispanic investigators; minority investigators indicated that inadequate mentoring was a boundary blocking the obtaining of funding [7].

Methods

A retrospective survey was carried out of all exit interviews with program director at Howard University Hospital psychiatry residency program in Washington DC, over a period of 10 years from 2008 to 2018. Our University is the largest institution among Historically Black Colleges and Universities (HBCU's) and has played an important role in training of minority physicians since 1862. This study did not receive IRB approval, because this survey was performed primarily for educational quality improvement of residency training and to implement mentorship program in the residency program. This exercise was deemed exempt from Institutional Review Board (IRB) approval requirement as determined upon consultation with the Howard IRB.

A total of 55 residents participated in exit interviews during

That period. Majority (60 %) of the residents described themselves as African American. The baseline characteristics are summarized in Table 1.

The exit interview consisted of a semi-structured discussion with program director at the end of the residency training or at the time of transfer to fellowship or another programs. Residents were invited to share their feedback and asked a wide range of questions about their experience with residency including mentorship. The residents were informed that data is not part of their personnel files and only used for quality improvement. Descriptive statistics were used to characterize the results. Important themes from resident's responses were identified through a process of manual coding of qualitative data.

Table 1: Characteristics of Participating Residents

Male	30
Female	25
African American	33 (60%)
White	3 (5.4%)
Hispanic	2 (3.6%)
Asian	14 (25.4%)
African	3 (5.4%)
Total	55

Table 2: Attributes of an Effective Research Mentoring Relationships

Personal Relationship	▪ Mutual respect, commitment and mutual career goals ▪ Serving as role model ▪ A sense of altruism ▪ Active listening ▪ Shared values
Setting Up Goals/Expectations	▪ Setting up realistic, attainable goals ▪ Establishing short- and long-term goals ▪ Clear expectations of the relationship ▪ Establishment of work- related coaching
Develpiong Skills	▪ Developing mentees skills ▪ Developing technical skills, accurately assessing mentees' understanding of knowledge and skills ▪ Valuing and practicing ethical behavior and responsible conduct of research
Diversity/Culturally/Focused Skills	▪ Advancing equity and inclusion ▪ Being culturally responsive ▪ Reducing the impact of bias ▪ Reducing the impact of stereotype threat
Interpersonal Skills	▪ Listening actively ▪ Aligning mentor and mentee expectations ▪ Building trusting relationships/ honesty
Sponsorship Skills	▪ Fostering mentees' independence ▪ Promoting professional development ▪ Establishing and fostering mentee professional networks ▪ Actively advocating on behalf of mentees
Psychosocial Skills	▪ providing motivation ▪ Developing mentee career self-efficacy • Developing mentee research self-efficacy • ▪ Developing a sense of belonging

Results

Majority of the residents (80 %) reported having access to a mentor. The quality of experience with mentorship varied widely, 25 % indicated a very positive mentoring relationship, while 20 % indicated a predominantly negative experience. Most of the residents (55 %) indicated a neutral or somewhat satisfied experience with mentorship. Some of the residents felt that they were discouraged by the so-called "mentors"; they successfully convinced them to neglect their opinion and throw away their ideas simply because they claimed it was not worth their time and wouldn't help them reach your career goals.

During the discussions about mentorship, residents identified various themes when it comes to developing a strong relationship between a mentor and a mentee. One of the main themes to having a significant mentor-mentee relationship was a basic understanding and the developing of trust in each other. One resident indicated that mentor and mentee "should share their educational backgrounds, experiences, challenges, struggles, and stories of how they succeeded in pertinent filed of their interest". Residents indicated that mentor and mentee should establish short term and long-term goals; they should actively listen to and appreciate the feedback they receive from each other. Residents indicated that thy felt more comfortable if the mentor-mentee relationship is bidirectional.

Another important theme was defining roles and responsibilities. The mentee should be clear and concise about their motivations when they explain to the mentor what exactly their career goals are and where they want to focus; based on the mentee's request, the mentor should develop an effective plan to enhance the mentee specific skills. Residents indicated that open communication and acceptance of differences in opinion played an essential role in strengthening a mentor-mentee relationship.

Leadership and advocacy were another major theme. Residents preferred mentors that had leadership experience and looked up to them to become effective leaders and advocates. Mentor's ability to build skills was another important theme. Developing these skills sets enabled mentees to build knowledge, improve their skills and empower themselves.

Finally, some residents indicated that mentors and mentees should have a mutual understanding that there are other things to focus on in life besides work. Mentors and mentees should spend a reasonable amount of time with each other in

order to progress and grow as individuals, and they shouldn't allow the mentorship to consume their lives; it's important to take care of oneself and maintain a work-life balance.

Discussion

Although virtually any two individuals can build a productive, healthy mentor-mentee relationship, it is important to understand the ethnic and racial dimensions of mentor-mentee relationships. In recent years, residency workforce has become increasingly diverse. Diversity is defined as "a wide range of interests, backgrounds, and experiences," and it also includes "openness to accept differences among people, cultures, and perspectives [8].

Mentors, and mentees, coming from diverse cultures must overcome their prejudices, fears, biases, and stereotypes about other races, religions, and ethnicities in order to have a successful, strong relationship. Additionally, they need to identify a non-judgmental way to deal with each aspect of the relationship. There are several consequences of ignoring cultural diversity in mentoring, such as miscommunication, conflicts in working styles, and unrealistic and mismatched expectations [9, 10]. Ultimately ignoring cultural diversity in mentoring relationships could lead to reduced work productivity and increased career dissatisfaction leading to burnout.

Similar to any other relationship, maintaining appropriate personal and ethical boundaries are essential. At the same time, mentors and mentees must show each other that they are committed to their relationship by spending an adequate amount of time together. This could be challenging at a time when both groups distance themselves due to other priorities; this would obviously cause the relationship to suffer. Commitment is the key to maintaining an active, productive relationship. A mentoring relationship is neither a peer relationship nor a parent-child relationship, where the child depends on parents for guidance and resources. A productive mentoring relationship is adopting various roles as the needs arise.

In our study majority of the residents indicated involvement in a mentoring relationship. This may reflect the training experience in a resource-rich academic center. The reality of mentoring experience in community based or geographically isolated training programs may be different. Even then 55 % of residents indicated a neutral or somewhat satisfied experience with mentorship. While some of the residents felt that they were discouraged by the so-called "mentors" and had negative mentoring experience. Successful and positive mentoring experience can play a crucial role in mitigating the physician burnout during residency. Feelings of inadequacy, emotional exhaustion, lack of personal accomplishment affects up to 70% of physicians and residents leading to career dissatisfaction and impacts overall quality of life [11].. Studies show mentorship program have a proven track record of improving professional development and academic success [12]. In conclusion, despite the tremendous benefit of mentorship, there is a paucity of formal structured programs that could be beneficial to the academic environment and for the successful career development among minority psychiatry residents. Authors propose implementation and evaluation

Of effective mentoring program in training settings to provide higher level of motivation, academic success as well improve overall quality of life for residents.

Limitations

To our knowledge, this is the first study that describes experiences of psychiatry residents from an HBCU. However, the study has several limitations. The data came from exit interview by program director and the residents may have felt compelled to say only good things as they were leaving the program. Although the participation in the exit survey was voluntary, the vast majority of the residents (94 %) participated in the survey. In addition, residents' opinions may have been biased by over representation of resident's strong opinions about mentorship or academic medicine

Conclusion

Residents considered mentorship as important in professional success. This study supports a tailored approach to the development of mentorship programs. Future work to evaluate existing mentorship programs and develop new initiatives to meet the needs of racial and ethnic minority residents are essential for increasing diversity across all faculty ranks in academic medicine.

Acknowledgement

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