ORIGINAL ARTICLE A CALL FOR MENTORING OF MEDICAL STUDENTS IN THE BACKDROP OF INTEGRATED CURRICULUM

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Background: Integrated Modular Teaching program was introduced at Foundation University Medical College in 2009. The concept of integrated modular teaching was new to the faculty and students. A need was felt by Department of Medical Education for establishing a mentoring system in order to have a better understanding of students' problem, to provide them continuous support and to make them sail smoothly through this new system. This study was conducted for need assessment and to gain students' perspectives regarding establishing a mentoring system. **Methods:** It was a descriptive cross-sectional study. A 5-point Likert scale questionnaire was administered to third year medical students of academic year 2010–14, who underwent the new integrated curriculum. The questionnaire explored the students' view regarding the need of mentoring platform in the institution as part of formal education. The questionnaire focused on the students' knowledge of mentoring, their experience with informal mentoring, desire for mentoring and environment for mentoring. Data were analysed using SPSS-10. **Results:** Eighty-six percent of the participants agreed to the statement that there is a need for a personal, confidential support system. **Conclusion:** Students are aware of benefits of mentoring and seek informal mentoring from faculty and senior colleagues. There is need of formal mentoring program at institutional level.

Keywords: Mentoring, Need assessment, Likert scale, Integrated curriculum, Medical Education J Ayub Med Coll Abbottabad 2013;25(1-2):74–7

INTRODUCTION

The importance of having a mentoring program at institutions is well-recognised all over the world. In developed countries, it is a rule rather than exception to have a mentoring program at the medical institution. However in developing countries few institutions have formal mentoring programs. In other institutions students on their own seek guidance and support from faculty and senior colleagues which can be considered as informal mentoring. The problems of informal mentoring include the following; at the institution level it is not known who is mentoring whom and to what extent the mentor is successful, it is unstructured, without any formal training and based on personal liking of students. Similarly the institution is unaware of the support required by informal mentors. In routine the students are usually overburdened by the syllabi and the hectic schedules of medical schools. To reduce students' stress and have a better understanding of students problem it is imperative to develop a formal mentoring program at the institutions. The need of mentoring program is felt even more with the implementation of new integrated modular teaching program.

Mentoring has many definitions. The mentor is a more experienced person than the mentee, the person who needs mentoring. Mentoring is a long-term relationship and usually develops at the time of transition in the mentees' life.^{1,2} Another definition of Mentoring is 'A steady, long-lasting relationship designed to promote the mentee's overall development'.³ The Gifted Resource Centre defines mentorship as 'the one-on-one learning relationship between a student and an expert in a specific topic or discipline. The mentor supports and guides the student to develop in that area of interest'.⁴

The mentoring programs have been used for many different purposes. At the New York University School of Medicine, a mentoring program was implemented in first two years of medical college. The aim of the program was to inculcate professionalism among the medical students. The program provided students with the opportunity to improve the skill and attitude and to discuss their professional development with the skilled and motivated faculty.⁵

A meta analysis of school based mentoring conducted in year 2010 provides the evidence of effectiveness of mentoring program in terms of improved performance, reduced absenteeism and misconduct and increased non-parental support from peers and senior colleagues. Though the school based mentoring is aimed at academic and personal growth of students however it creates a sense of belonging, confidence and effectiveness in the students.⁶

As we know that curriculum changes are taking place all over the world, the implementation of new integrated modular teaching program at medical schools is accompanied by faculty and students' resistance. There is a need that awareness must be created in students, parents and the faculty regarding the new system. A sudden change to new system will create resistance in community and parents.⁷

An article by Felder and Brent narrates students' resistance towards small-group learning because of their less reliance on teachers.⁸

The implementation of new integrated curriculum has faced resistance from faculty, students and their parents. Parents are important stakeholders as they are supporting their children and remain conscious of the progress they make. The students as well as parents are concerned regarding the new curricula and need to be reassured.⁹

The reassurance of students and parents will lead to collaborative working and the benefit of working collaboratively for a common goal is a well-known fact. Mentoring will enhance communication, which in turn fosters successful educational innovation. Lack of communication among disciplines, and negative attitude of faculty are important barriers to integration.¹⁰

In order to implement the new concepts of teaching and learning in true spirit and to have a better understanding of the issues of students, a sounding board is desirable where the concerns of faculty and students can be discussed. Keeping in view the desired benefits of mentoring it was felt by the medical education department that a formal mentoring program should be introduced at the institution. A study was conducted for need assessment of mentoring program and as well as to identify the areas where the program must focus. Interestingly this study was concurrent with the evaluation of implemented modular system. The results of both the studies supported each other and strengthened the idea of establishment of mentoring system at the institution.

METHOD AND SUBJECTS

The study was approved by ethical review committee of Foundation University Medical College. This cross-sectional descriptive and analytical study was conducted with third year medical student of session 2010–14, who had undergone the new integrated modular system. A five point Likert scale questionnaire was used which was introduced during a self directed learning session and was collected after one hour. The number of participants was 60 and the response rate was 100%.

For the purpose of study the term mentorship was defined as 'A more senior person within the training environment with whom you have a sustained, ongoing relationship. A mentor promotes your professional development by discussing your goals, needs, weaknesses and accomplishments'. The data were analysed using SPSS-10.

RESULTS

The questionnaire started with assessment of satisfaction level of students towards their choice of profession and their ability to cope with stress as a result of their academic responsibilities and change to an integrated modular system. In response 60% of the students stated that they occasionally felt unsure of themselves and were unable to cope with their academic responsibilities.

The next four questions were regarding their awareness of mentoring and presence of informal mentoring in the institution. The question probed whether the students discuss their academic and personal problems with tutors and senior colleagues. If so, did they get their problems solved with the help of senior colleagues and faculty. Out of all the participants, 83% agreed that they seek guidance from their seniors and 70% agreed that they usually get their problems solved with the help of their senior colleagues. Only 55% agreed that they feel comfortable to discuss their academic problem with their tutors and only 38% agreed that they find solution to their problems with the help of faculty. However 31% of participants were unsure about the role of faculty in solving their problems (Table-1).

Next question was regarding the environment whether it was conducive for a healthy student faculty interaction. Around 51% agreed that the environment was conducive to discuss their problems with the tutors. As far as the culture of feedback is concerned, 41% of the participants disagreed to the statement that they received feedback and only 36% were able to give feedback regarding tutors' performance. Question eleven and twelve were regarding the need for mentoring system and 85% of the students agreed that there is a need of mentoring system in the institution (Table-2).

Table-1: Questions regarding Informal mentoring

Item	Agree (%)	Unsure (%)	Disagree (%)
Previous experience of Informal mentoring from faculty	52	23	25
Previous experience of Informal mentoring from senior colleagues	83	12	5
Mentoring from colleagues was beneficial	70	20	10
Mentoring from faculty was beneficial	38	32	30

 Table-2: Question regarding need and environment of mentoring

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	Agree	Unsure	Disagree	
Item	(%)	(%)	(%)	
Satisfaction with profession	85	5	10	
Occasional inability to cope with	60	12	28	
academic responsibilities				
Trend of getting feedback regarding	41	19	40	
own performance				
Environment conducive to learning	51	24	25	
Provide feedback to tutor's performance	36	40	24	
Need for a formal Mentoring/ support	86	12	2	
program				

DISCUSSION

The questionnaire was designed to retrieve objectives regarding the knowledge of mentoring, experiences with informal mentoring, environment for mentoring and the need for a mentoring program in the organization.

When we analysed the response regarding the knowledge and experience of mentoring, it was

identified that students do have the knowledge of mentoring and they were comfortable in seeking guidance from their seniors or tutors. Here we can conclude that if mentoring is a routine at the institutions with assigned mentors and protected time slot, students will be at ease to discuss their problems.

However in comparison to faculty an increase percentage of students preferred their colleagues for seeking help and guidance for their problems which indicates a relationship of trust and comfort among colleagues. It was also obvious from the result that faculty was less successful in getting their problems solved. It can be concluded that establishing a peer mentoring system can be successful and at the same time the faculty must be trained in the skill of mentoring to get the desired benefits of mentoring. Without training, the mentors are unable to meet the challenges imposed on them.¹¹

According to Hale a good mentor should be a good listener, challenging and imaginative. He should be available, and should be sincere and keen.¹²

After the analysis of questions regarding environment and trend of feedback, the researcher realized that the environment is conducive but there is a lack of communication among faculty and students as most of them are not receiving or giving feedback. When we intend to establish a mentoring system we explore the environment where the mentoring has to take place whether there is formal or informal trend of discussion with the students regarding their progress. If the environment is threatening, students may find it difficult to trust even the mentoring system due to loss of confidentiality or for risk of facing vindictiveness of faculty.

At the end the researcher tried to assess the academic workload, the hospital environment and need of establishing a formal mentoring system. In response 86% of the participants agreed on having a formal mentoring system. Though the results state that majority of students were satisfied with the choice of profession but at times they felt unsure of themselves and were unable to cope with the academic responsibilities. It creates an alarm that probably there are chances of drop out. The evidence from literature indicates that mentoring is highly helpful for the career progression of students. According to Gallager, having a successful person as mentor can help the students to have focused approach towards future.⁴

Similarly the feeling of being unwelcome in the hospital and college setting can be explained in the context of implementation of integrated modular system. It is a resource intense program and requires faculty time, commitment and training.

There is anecdotal evidence that the new student-centred teaching program is not usually accepted by the students as they are in the habit of

getting dictation. They may become hostile on being made responsible for their own learning. They may question regarding the expenditure being made on tuitions fees if they are not being taught. On the other hand, some very experienced teacher may become worried about the poor performance of the student which is normal happening in the transition phase of curriculum.¹³ To provide a better understanding of new system there is a strong need of establishing mentoring program for both students and faculty.

There are many institutions in our country where mentoring systems have been established. The barriers to mentoring include lack of organizational support, false expectation of mentee regarding their performance assessment, mismatch mentors and mentee. There is also possibility of bias or perception of nepotism for those involved in mentoring, dependency on mentors, difficulty in maintaining professional boundaries and gender issues. Sometimes mentors and mentee consider each other as friends rather teacher and students.^{12,14}

Literature search shows that senior educators do require mentoring when there is a change in their career path. Educational institutions do not usually provide mentors for faculty. The issues of faculty can be resolved if they are also provided with a platform to discuss their problems. Literature shows that the outcome of a pilot study of faculty mentoring programme was successful as the participant appreciated the importance of role model and having someone to depend upon.^{11,15}

CONCLUSION

The students rely more on their senior colleagues for their problems suggesting the need of peer mentoring. Even in the presence of conducive environment, knowledge of mentoring, and informal mentoring, participants still agree to the need of having a formal mentoring program. There is lack of training and trend that inhibits communication between faculty and students. One is able to find out the level of interest of students, identify the problem areas and implement the changes effectively if curricular innovation and mentoring are introduced simultaneously and a combined evaluation is carried out by student, teacher and mentor.

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