

Challenges of Mentoring Program: Perceived by the Stakeholders

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ABSTRACT

Objective: To identify challenges faced by stakeholders of the mentoring program, i.e. mentors, mentees, and mentoring committee in the University College of Medicine & Dentistry, The University of Lahore.

Methodology: This qualitative exploratory study was conducted at the University College of Medicine & Dentistry (UCMD), Lahore. Six focus group discussions were conducted with 18 mentees, 12 mentors, and 6 members of mentoring committee. Two focus group discussions were conducted with mentors, three with mentees, and one with mentoring committee. Thematic analysis was performed after transcribing the recorded data.

Results: The major challenges faced by mentors are lack of a faculty development program, no incentives, mentees considered it a complaint box, lack of students' seriousness, and lack of authority. Major challenges faced by mentees are non-availability of mentors, non-confidentiality, untrained mentors, and improper scheduling. Major challenges faced by the mentoring committee are lack of committee training, lack of proper job descriptions, and improper channeling.

Conclusion: This study concludes that the issues faced by mentors, mentees, and the mentoring committee are serious and must be addressed for the smooth running of the mentoring program.

Keywords: *Qualitative research. Job description. Mentors.*

INTRODUCTION

Mentoring involves a long-term relationship where a senior person (mentor) guides and supports a junior person (mentee) throughout the period of education and training.¹ Mentoring to the students can have positive effects on mentees, mentors, and concerned educational institute.² Mentees experience supportive infrastructure, educational career advancement, and increased confidence in the college.³ Mentors experience personal satisfaction, collegiality, networking, and career enhancement. College sees improved productivity in terms of future healthcare providers, and enhanced faculty skills.²

Mentoring has also been found to increase the academic success of students. Affective skills such as empathy, caring, altruism, and compassion are attributes in medical students. All too often, they are underdeveloped because of an exhaustive curriculum with minimal time for relaxation, high parental expectations, fear of ragging (in case of the first year), occasional humiliating behavior of teachers, loneliness, and other factors that make medical study difficult for most students. Mentoring program has

been advocated to lessen the burden of this stress.⁴

Keeping in view of all this a "Mentoring Program" was initiated in the University College of Medicine & Dentistry, Lahore in 2014 for the new entrants of that year. The goal of the program was to provide the students with an immediate support network that can help students to reach their full potential, provide a supportive environment, and reassurance. A total of 750 students of all classes 1st, 2nd, 3rd, 4th, and final year MBBS were provided with a total of 60 mentors for group mentoring. Mentoring session was conducted once a month for 1 hour duration and incorporated in the timetable of the respective class.

A range of studies have highlighted the challenges of mentoring programs from the perspectives of different stakeholders. Mentors and mentees in undergraduate programs have differing views on the benefits and challenges, with role modeling and psychological support being particularly important.⁵ Mentors have been seen to be often overburdened with heavy teaching loads or disproportionate administrative duties, resulting in inadequate time for research, professional development, and mentoring.⁶ In an Eastern Ethiopian University, it was seen that about 75% of mentors and mentees had negative attitudes and only 25% responded positively towards the mentoring process.⁷ Upon exploration of issues affecting the mentoring process, it has also been found that mentoring faces challenges such as limited time, teachers' negative attitudes, lack of motivation, and poor relationship between teachers and administrators.⁸ In teacher development programs, mentors have emphasized the need for more interaction, systematic

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observation, and mentor training.⁹ These studies collectively underscore the need for tailored and well-structured mentoring programs that address the specific needs and challenges of different stakeholders. The rationale of our study was to highlight the main challenges during stakeholders of the mentoring program, that is mentors, mentees, and mentoring committee in UCMD, UOL and how these challenges are hindering the growth and successful conduction of the formal mentoring program.

METHODOLOGY

This was a qualitative exploratory study conducted at the University College of Medicine & Dentistry, Lahore from August to December 2022. Ethical approval was provided by the ethical review board of the college. Six focus group discussions were conducted with 18 mentees, 12 mentors, and 6 members of mentoring committee. Two focus group discussions (FGDs) were conducted from the mentors (6 mentors in each group) of UCMD who had an experience of at least 2 years of mentorship. Similarly, three FGDs were conducted from the mentees of 1st, 2nd, 3rd, 4th, and final year MBBS students. Each group included 6 mentees. The last focus group had 6 members from the mentoring committee with 2 years of experience. In order to avoid selection bias, inclusion and exclusion criteria were identified through which participants were selected for interview purpose. Mentees and mentors who had attended at least 6 mentoring sessions were included in the study. Mentees and mentors who did not respond to two reminders for the FGD and who did not give consent to participate in the study were excluded.

Interview questions were prepared by the detailed literature search which were then validated by 2 expert medical educationists. Focus group discussions were conducted to identify challenges during stakeholders of the mentoring program that is mentors, mentees, and the mentoring committee of UCMD. A total of five interview questions were designed based on the steps of the mentoring cycle. Participants were provided with a participant information sheet including a consent form. Data were obtained by conducting 6 focus group discussions with mentors, mentees, and the members of the mentoring committee at UCMD.

DATA ANALYSIS

The recorded data was transcribed by using Otter.ai which was then analyzed. After recording the interview,

each interview was transcribed and sent to individual student and teacher for review purpose and confirmation in order to reduce observer bias. Atlas.ti qualitative data analysis tool was used for thematic analysis of the transcribed data. Themes and codes were carved out of the transcribed data. Detailed methodology and results were imprinted throughout to ensure transferability.

INTERVIEW QUESTIONS

1. What is your perception of your mentoring program? Is it good or bad, how and why?
2. Do you have any poor mentoring experience/bad interaction?
3. What challenges/difficulties have you faced in your mentoring program? (probe for not fulfilling time commitments, undue/over expectations, unfair manipulations, non-matching/ineffective mentors and mentees)
4. Do you want to change your mentor/mentees? If yes, why?
5. How can these difficulties be overcome?

RESULTS

This study focused on the challenges faced by the mentors, mentees, and mentoring committee. Participants chosen for this study are shown in Table 1. Table 2 shows the respective challenges faced by the stakeholders of the mentoring program i.e., mentors, mentees, and mentoring committee.

DISCUSSION

A regulated and official relationship between a doctor/teacher with more experience (the mentor) and a student (mentee) with less experience is referred to as a mentorship program in medical school. This program's objective was to offer the mentee opportunities for professional development in their medical career as well as mentoring and assistance. Mentorship has been highlighted as a vital aspect of the professional growth of medical students and residents.¹⁰ According to a study, faculty, residents, and medical students can all benefit greatly from mentoring in terms of their professional development and general well being.¹¹ Our study showed that the lack of faculty development program, no incentive, complaint box, lack of students' seriousness, and lack of authority were the major challenges faced by mentors.

Another study was conducted to explore the difficulties

Table 1: Participants' Information

Gender	Mentors (n=12)	Mentees (n=18)	Mentoring Committee (n=6)
Male	5	6	1
Female	7	12	5

Table 2: Challenges Faced by Mentors, Mentees, and Mentoring Committee

Themes	Representative Quotations
Challenges Faced by Mentors	
Lack of Faculty Development Program	<i>"Only one workshop was conducted in an entire year which is not sufficient."</i>
No Incentive	<i>"At the start, mentors were given little bit of incentive at annual dinner, but now, no one appreciates our work and there is not even a single certificate of appreciation." "It seems like a burden to us."</i>
Complaint Box	<i>"Students always complaint only about hostel & transport issues, etc."</i>
Lack of Student's Seriousness	<i>"Attendance of the students is the issue. According to them, it's a waste of time and effort".</i>
Lack of Authority	<i>"Students don't want to share anything with us because they now know that we will not be able to approach the higher ups and will not be able to solve their issues and problems".</i>
Challenges Faced by Mentees	
Non-Availability	<i>"Most of the time, when we reach out to our mentor, office is empty. When I ask the staff, they say doctor sb is in OT". "In my and my peers' experience, usually it is really difficult to schedule time with a mentor from clinical side."</i>
Non-Confidentiality	<i>"In a group of this many people, I am not able to open up in front of our mentor." "My mentors used to discuss my issue in front of my class fellows."</i>
Un-Trained Mentors	<i>"My mentor doesn't even know how to talk to us".</i>
Improper Scheduling	<i>"For me, mentoring sessions themselves are so spaced out that sometimes it's really difficult to have good interaction to highlight the complaints"</i>
Challenges Faced by Mentoring Committee	
Improper Challenging Tasks	<i>"Student's results have not been shared with us by assessment cell and administration is also not supporting us regarding attendance of students. It is not an easy task for us to send attendance and results to the mentors."</i>
Lack of Committee Training	<i>"For us there is no training program. Since I joined this committee, till now, there is no training for us as a committee."</i>
Lack of Proper Job Description	<i>"When I joined this committee I didn't even know what to do. With some experience, now I am able to do some of the tasks which are insufficient."</i>

& challenges of residents during the mentoring program. They found similar concerns raised by mentors.¹²

Our study reported that mentors may find it challenging to assist a diverse range of students with various backgrounds, learning preferences, and professional aspirations. It can be time-consuming and difficult for mentors to continuously refresh their knowledge and abilities in order to keep up with medical breakthroughs.¹³ Dealing with burnout and stress in learners, mentors may find it difficult to support learners which can have a detrimental effect on their health and learning.¹⁴

Our results showed that no incentives for the faculty member were highlighted by mentors. Similarly, in

another study, it was reported that medical college mentors commonly face the challenge of no specific incentive which should be a part of the mentorship program. This demotivates mentors, as an incentive helps to increase job satisfaction and motivation.¹⁵ Moreover, mentees' engagement with mentoring program can also pose a problem with several studies reporting low student participation. Due to a lack of mentee engagement, mentees may not participate fully in the mentoring process or may find it difficult to build a solid rapport with their mentor.¹⁶ Similarly, a study at King AbdulAziz University Faculty of Medicine, Saudi Arabia, reported that group meetings and one-on-one meetings were attended by only 60% and 49% of all students, respectively. The authors concluded that

sustained mentor and administration staff motivation is a prerequisite for a successful mentoring program.¹⁷ Non-availability of mentors, non-confidentiality, untrained mentors, and improper scheduling were the key issues reported by mentees in our study. Another study found that due to insufficient time commitment from mentors, many mentees struggle with mentors who are unable to commit enough time to the mentorship relationship.¹⁴ It can also be challenging for some mentees to have a mentor who does not share their interests or goals for their career.¹⁸ Finding a balance between teaching and clinical responsibilities is difficult. Mentors frequently have busy schedules, which makes it difficult for them to devote enough time to mentoring.¹⁹ Resistance to feedback or criticism was highlighted by mentees in our study. This was also supported by a study indicating that certain mentees may find it difficult to take constructive criticism or feedback from their mentors, which might inhibit their professional development.²⁰ According to a study published in the *Journal of Medical Education and Training*, miscommunication and misunderstandings between a mentor and mentee might be detrimental to the mentorship relationship.²¹ Mentors may not be sufficiently prepared for their responsibilities, which makes it difficult for them to effectively mentor their mentees.²²

Our results showed that lack of mentoring committee training & proper job description and improper challenging tasks were the main issues reported by the mentoring committee. Due to inadequate evaluation and feedback, mentoring committees may find it challenging to accurately assess the mentoring process and offer feedback, which makes it difficult to maintain and expand the program. Mentoring committees may have trouble connecting mentors and mentees according to their needs and aspirations, which could make the mentoring connection less effective.²³ It was also observed that mentoring committees may encounter difficulties in providing adequate resources such as training programs or support networks to mentors and mentees.¹⁴ Another study indicated that because of their other obligations, mentors and mentees may find it difficult to set aside adequate time for their mentoring activities.¹⁶ A study of final year medical student and junior doctor mentorship programs at Great Western Hospital, Swinton found that despite 96% of students recommending the scheme, not all students felt that they needed a mentor, and 20% of students chose not to have any contact with their mentor. Nevertheless, students also faced challenges in finding a mentor. Only 44% of students were able to find a suitable research mentor with ease.¹

CONCLUSION

Major challenges identified by mentors are less incentives, lack of authority, lack of mentor development plan, and non-seriousness of students. Improper scheduling, non-availability of mentors, untrained mentors, and breach of confidentiality are the main issues identified by the students. The mentoring committee also faces challenges such as a lack of job description and untrained mentors. So, these issues need to be addressed as soon as possible to improve the quality of the mentoring program.

LIMITATIONS & RECOMMENDATIONS

The study was only conducted in the University College of Medicine & Dentistry, Lahore. There are very few institutes with proper formal mentoring programs, so the sample size is small. Further research to collect data from multiple institutes with proper mentoring program is advised. The study recommends that mentees and mentors should be matched in a way that encourages their relationship to succeed. This may be through a validated matching process or mentees choosing their own mentor. Mentors should receive training in the requirements of the role and in delivering effective feedback. Incentives should be offered, for example, recognition of mentoring for promotion. Likewise, mentees should be made aware of what is expected of them.

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