The role models of medical education mentors

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I do not have an affiliation (financial or otherwise) with a pharmaceutical, medical device or communications organization.
The CanNorMent Study

- A collaborative investigation of physician-mentors’ experiences and perspectives on group-based mentorship programs at three medical schools, two in Norway and one in Canada

- The factors that contribute to successful, well-functioning, longitudinal group-based mentorship programs for undergraduate medical students, from the perspective of mentors
Empirical material

• Mentors at three medical programs
  – University of Bergen
  – University of Tromsø
  – McGill University
Empirical material

- Mentors of three medical programs
  - University of Bergen
  - University of Tromsø
  - McGill University

- Purpose of mentorship programs:
  - help students to become patient-centered
  - professional identity formation (PIF)
  - support students through their transition to physicianhood
Empirical material

- **Survey** to mentors in Norway and Canada (N=272)
- **Qualitative research interviews** (N=23)
Research focus

Developing as mentors

- What are the inspirations, motivations and sources for mentors in understanding their mentor role?

- From a faculty development perspective: How to support mentor development
Theoretical perspectives informing our analyses

• Narrative reading  (Riessman, C. K. (2008))

• Identified «threshold concept» in their development as mentors  (Meyer, J.H.F. & Land, R. (2003))
Findings
Developing as mentors

- Re-living student and residency years
  - Reflection
  - Re-contextualizing
«Remember my past self»

Sometimes memory is short, and psychology studies show that you forget a lot. You even forget how you used to think a few years back. You remember yourself now, but you don’t remember your past self a lot. And the mentees actually helped me remember my past self... My hopes, my fears, what I thought, what I wanted to be, etc. So, I think it’s a huge opportunity for growth if you have the insight to take that in.

(Informant 6)
The good rolemodels came into play late during my training, and that I think was really unfortunate. I missed something like this, like a type of mentor program. Because we were so many, there was such much to learn and it was so easy to drown in all the technical and the practical stuff those first years…

(Informant 21)
Developing as mentors

• Re-living student and residency years

• Student-centeredness as a threshold concept?
«It's not about me»

In the beginning I basically did PowerPoint slides, you know. I felt I had a curriculum to deliver. I needed to know that I had given them something. But it is not about me. The encounter is about helping the students.

(Informant 4)
Developing as mentors

- Re-living student and residency years
- Student-centeredness as a threshold concept?
- From problem-solver to “being an encounter”
«Confidence to focus on the students»

So, I think it takes self-confidence to be able to feel like you are an encounter with someone else. You are not even quite sure what the conclusion will be, and it doesn’t matter, but you have the confidence in that the encounter will create something.

(Informant 4)
«They didn’t have any problems»

Well, I am thinking, up to 10% of medical students struggle. And you need to identify who they are in a good way and help them. So, the group that I have mentored haven’t had that. They have all been wonderful people without problems; they talk and share and are very engaged in our meeting. But they don’t have any problems. So I don’t feel I have been… or that I have had much value for that group.

(Informant 22)
Developing as mentors

- Re-living student and residency years
- Student-centeredness as a threshold concept?
- From problem-solver to “being an encounter”
- Dealing with the discomfort of being in liminal phases
I have never learned it. I have never taken any courses in how to teach, never did anything. I am very self taught. I think that works too. [...] I have actively avoided it. I use myself as a reference for what works and what doesn’t work.
I have never learned it. I have never taken any courses in how to teach, never did anything. I am very self taught. I think that works too. […] I have actively avoided it. I use myself as a reference for what works and what doesn’t work. I have to say, I grew quite a bit just forcing myself in my own mind to go through the gymnastics of preparing for the meetings. Now that I have been in practice for thirty years… I was surprised. I was surprised how much I was able to get out of it. It is really… I have to say it was a continuing professional development to do these things.
Consequences for faculty development?
What do mentors need to develop/understand their role as mentors?

– Input: Conceptual change approach?
– Input: Skill-based approach?

and/or

– Revisiting learning trajectories?
Interconnected model of professional growth (Clarke & Hollingsworth 2002)