

## The Contribution of Mentoring for Female Resident Physicians

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Mentoring is an important aspect of career development for women.<sup>1 2</sup> It allows women to view themselves as competent to reach higher positions,<sup>3</sup> provides needed role models to nurture collaborative work culture,<sup>4</sup> and encourages women to network.<sup>3 5 6</sup> Junior faculty report improved confidence in professional development, research, education, and administration after participating in a mentoring program specific to women.<sup>7</sup>

Mentoring research highlights that women “actually have a greater need for mentoring than men,” because women are less “apt to see themselves as qualified for top positions” despite equivalent training and credentials (p. 1057).<sup>3</sup> Females leaving academia reported few role models who combined careers with rearing children.<sup>3 4 8</sup>

Women need mentors who combine technical and emotional support with help building professional networks.<sup>3</sup> Mentoring distinct to women is needed, in terms of protégé/mentor selection, training, emphasis on connection, and development of a culture supporting success.<sup>3 9</sup>

As a component of a larger qualitative study, we surveyed 23 female Emergency Medicine (EM) PGY1, 2, and 3 residents about the role that mentoring played in their career development. We asked the following questions: How did a mentor facilitate your growth as a physician? How did that mentor influence your career decision-making? What strategies do you suggest to encourage women in EM leadership? Their answers are summarized below.

## **Mentors Facilitate Growth**

Residents described their mentors' contribution in four areas: goal setting, encouragement, role model, and teacher. Mentors helped set goals by laying out “the possibilities” and helping process “significant experiences in order to allow the experience to positively shape my persona as a physician.” Encouragement came in the form of both “encouraging me to step out of my comfort zone” and creating awareness about how academic medicine works. Mentors served as role models of “compassionate physicians” by relating difficult situations to similar ones they had in the past. Residents also appreciate the opportunity to be candid because of the trust developed with a mentor. Mentors taught by example, and by sharing examples of people’s mistakes in the past in order to help residents avoid repeating those mistakes.

## **Mentors Use Specific Strategies to Encourage Self-Reflection**

Mentors exuded influence by maintaining a “calm and reflective analytical mode” in the often chaotic EM environment. One resident commented that their mentor “was not pushing me to do something they thought I should do, but showed me to follow my natural instinct.” Many residents commented that their mentors were extremely passionate about their jobs and very competent – inspiring residents to “approach work in the same manner and to strive to never ‘settle’ and to continue learning.” Mentors provided “clarity of the big, long-term picture” by encouraging questioning and introduction to new ideas.

## **Strategies to Encourage Women to Pursue EM Leadership**

Residents suggestions for ways to encourage women to pursue EM leadership emphasized developing a network of other successful women. Network development included creating time-sensitive opportunities that recognize the challenge of juggling raising a family with clinical training. One resident commented: "I think people in leadership should encourage women but allow them to engage in additional roles with their families." Residents wanted more women to be available to them as mentors, and they wanted more encouragement to explore various leadership strategies, the change to "try things on" with smaller projects. Several residents mentioned workshops at ACEP and the opportunity associations provide for networking among women.

This mini-study validated the need to identify women who are natural leaders and to "push them to seek out more leadership opportunities." Mentors have the capacity and awareness to broaden access for women in EM and thus strengthen the pathway to leadership for physicians in training.

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## References

1. Sambbunjak D, Straus SE, Marusic A. Mentoring in academic medicine: a systematic review. *JAMA*. 2006; 296(9): 1103-15. doi:10.1001/jama.296.9.1103.
2. Borges N, Navarro AM, Grover AC. Women physicians choosing a career in academic medicine. *Acad Med*. 2012; 87(1): 105-14. doi:10.1007/s40037-013-0055

3. Bickel J, Wara D, Atkinson B, et al. Increasing Women's Leadership in Academic Medicine: Report of the AAMC Project Implementation Committee. *Acad Med.* 2002; 77(10): 1043-1061.
4. Magrane D, Helitzer D, Morahan P, et al. Systems of Career Influences: A Conceptual model for Evaluating the Professional Development of Women in Academic Medicine. *J Womens Health.* 2012; 21(12): 1244-1251. doi: 10.1089/jwh.2012.3638.
5. Allen T, Poteet M, Russell J. Protégé Selection by Mentors: What Makes the Difference? *Journal of Organiz Behav.* 2000; 21: 271-282.
6. Gibson S. Being Mentored: The Experience of Women Faculty. *J Career Development.* 2004; 30(3): 173 – 188.
7. Wingard D, Garman K, Reznik V. Facilitating Faculty Success: Outcomes and Cost Benefit of the UCSD National Center of Leadership in Academic Medicine. *Acad Med.* 2004; 79(10): S9-11.
8. Mark S, Link H, Morahan P, Pololi L, Reznik V, Tropez-Sims S. Innovative Mentoring Programs to Promote Gender Equity in Academic Medicine. *Acad Med.* 2001; 76(1): 39-42.
9. Isaac C, Byars-Winston A, McSorley R, Schultz A, Kaatz A, Carnes ML. A qualitative study of work-life choices in academic internal medicine. *Adv Health Sci Educ Theory Pract/* 2014; 19(1), 29-41. doi: 10.1007/s10459-013-9457-5.