

MENTORING UNDERGRADUATE MEDICAL STUDENTS: PERCEPTION OF FACULTIES ON MENTORING PROGRAM IN MELAKA MANIPAL MEDICAL COLLEGE

Kye Mon Min Swe, Amit Bhardwaj

BACKGROUND: Mentoring was developed in the USA in the 1970s within large private-sector corporations to support junior staff. Since the 1990s, mentoring programs have been introduced in various medical professions, most frequently in the field of nursing. Mentoring is key to a successful career in medicine. Mentor programmes are increasingly common in undergraduate medicine and dentistry and many positive effects have been reported.

OBJECTIVE: To explore how teachers in medical and dental education understand their role as mentors and to explore the perceptions of faculties regarding mentoring medical students at Melaka Manipal Medical College

METHOD: College based cross sectional study was conducted at Melaka Manipal Medical College, Melaka, Malaysia from February to May 2013. To assess perception, five points Likert scale was used for scoring, 5. Strongly agree, 4. Agree 3. Not Sure 2. Disagree and 1. Strongly Disagree.

RESULTS: There were 48 faculties from Medicine and Dental (38 medicines and 10 dental) participated in this study who were teaching experiences range from 1 year to 36 year with mean 11.79 years. Regarding perception of faculties on the mentorship program, 80% of the faculties willing to discuss with the mentor regarding personal, financial issues as well as academic performance individually, 97.9% were willing to help mentees to improve academic performance and 62.5% of faculties agree that there should have a formal training prior to appointment as mentor

Table (1) Responses (%) of Perception of faculties on mentorship program

Sr.	Statement	Strongly disagree (%)	Disagree (%)	Uncertain (%)	Agree (%)	Strongly agree (%)
1	Mentors should have freedom to choose their own mentees	29.2	39.6	16.7	10.4	4.2
2	Mentors should meet their mentees monthly	8.3	18.8	16.7	29.2	27.1
3	Mentors and mentees should meet informally	6.2	12.5	10.4	52.1	18.8
4	Mentees can discuss with the mentor regarding personal, financial issues as well as academic performance individually	0	10.4	12.5	56.2	18.8
5	Mentors can help mentees to improve academic performance	0	0	2.1	45.8	52.1
6	Neither mentors nor mentees are interested in mentorship program	18.8	33.3	35.4	6.2	6.2
7	Meeting with the mentee is wasting of time	31.2	56.2	8.3	2.1	2.1
8	Mentors cannot solve personal issues of the mentees	10.4	39.6	25	18.8	6.2
9	Mentors cannot solve financial issues of the mentees	2.1	22.9	31.2	29.2	4.6
10	Mentors can have positive influence on choosing future specialities options of the mentees	0	2.1	16.7	56.2	25
11	Mentor and mentee lack of time can be the barrier for successful programme	0	10.4	12.5	56.2	20.8
12	Mentors should have a formal training prior to appointment as mentor	6.2	10.4	20.8	39.6	22.9

Study Limitation: This study carried out at one medical university. It will be better if we can carry out all the medical universities in Malaysia

CONCLUSION: It was concluded that the roles, tasks and communication of mentor and mentees should be standardized. We recommend that mentors should have a formal training prior to appointment as mentor.

REFERENCE:

1. Buddeberg-Fischer B, Herta KD: Formal mentoring programmes for medical students and doctors--a review of the Medline literature. *Med Teach* 2006, 28(3):248-257.
2. Standing Committee on Postgraduate Medical and Dental Education: Supporting doctors and dentists at work: An enquiry into mentoring. London: SCOPME; 1998.
3. Gray J, Armstrong P: Academic health leadership: looking to the future. Proceedings of a workshop held at the Canadian Institute of Academic Medicine meeting Quebec, Que., Canada, Apr. 25 and 26, 2003. *Clin Invest Med* 2003, 26:315-326.
4. DeAngelis CD: Professors not professing. *JAMA* 2004, 292:1060-1061.

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