INTRODUCTION

The term “mentor” is derived from the Greek mythology, where, in Odysseus’ absence, Mentor assumed the responsibility of guiding Telemachus until he matured and was able to think and act independently. Mentoring is a “voluntary, intense, committed, extended, dynamic, interactive, supportive, trusting relationship between two people, one experienced, and the other a newcomer, characterized by mutuality.”¹ In the workplace, however, mentors are not easily identified; this is especially true for clinician-scientists who lead a “double-life.” Although there is little empirical evidence in support of its efficacy, most of the literature supports the mentoring process. We will discuss concepts pertinent to mentorship in GI endoscopic research, often taken from other disciplines.

IMPORTANCE OF MENTORSHIP

Mentoring programs have proliferated in academic institutions and physician organizations, with programs providing mentoring services both on-site and at a distance.² All facilitate the initiation of mentoring relationships; some solely introduce potential mentors and mentees while others enhance the environment (recognition for mentoring and resources to assist). It is important to realize that mentoring is in the best interest of not only individual mentees but the concerned profession as a whole. Indeed, mentoring leads to high morale, improved retention rates, and increased productivity. Formal mentoring programs have been shown to have an overall positive impact on junior faculty and may assist in retention of dental school faculty.³ In a recent survey of 235 surgical residents, mentorship was the second most important response when asking participants to rank factors that favorably affected their decision to pursue a surgical residency.⁴ The establishment and success of mentoring programs in various specialties has, however, been varied. Neither men nor women residents in obstetrics and gynecology were found to have received adequate mentorship for careers in academic medicine.⁵ Although high satisfaction was reported in a Canadian National Research Fellowship Program in Gastroenterology, more than 50% of respondents believed that increased supervisor assistance in the preparation of their first operating grant application would have substantially enhanced the experience.⁶ The ASGE Workshop on Achieving Academic Success addresses this specific issue, among others.

MENTORSHIP QUALITIES

A successful mentor must be trustworthy and be gratified by the success of their mentee. Moreover, the mentor must be willing and able to support the mentee’s choices, even if they are different from his or her own.² There exist no differences between what nurses and other professional groups want from a mentor. Based on the nursing literature, the main roles of the mentor include being an inspirer, an investor, and a supporter.⁷,⁸ These have led, in fact, to the development of a Measuring Mentoring Potential (MMP) scale to assess mentors.⁷,⁸ A modified listing of the different assessment components is included in Table 1.

CHOOSING A MENTOR

Before choosing a mentor, the future mentee should formulate some goals for the fellowship. The junior trainee should avoid the temptation to become involved in writing chapters or reviews, as such activities yield a publication but do not advance a research career effectively.⁹ The mentee should have a specific timeline in mind and look for a tailored project. A mentor can help decide on a project, but it is better if the mentee brings forward a specific interest; she/he will thus be more willing to put in the effort and overcome the obstacles that are sure to occur.⁹ A more detailed approach to preparing for the first meeting can be found elsewhere.⁹,¹⁰ When choosing a mentor, the mentee should be familiar with the attributes of a good mentor listed above, and understand one’s own mentoring needs.⁹-¹¹ It is important to realize that no one person can be the ideal mentor. It helps to have mentors at different career stages, mentors who are clinically focused and research-oriented, and perhaps mentors of both genders. In addition to taking advantage of established mentoring programs, there are many opportunities to engage a mentor informally. Mentees should consider senior colleagues whom they respect, ask colleagues for suggestions and/or introductions, and attend events where mentors might be found.²

WORKING WITH A MENTOR

Mentoring is best thought of as a triad of interactions among the mentor, the mentee, and the environment for the relationship. In a recent survey of mentors and mentees in an Occupational Therapy teaching program, most rated the aims of mentorship in decreasing importance as the following: To facilitate the professional development of students through guidance and counsel; to establish
a relationship characterized as an ongoing partnership based on trust, knowledge, and mutual respect; to help students identify with the professional environment, navigate difficult situations, and help build self-confidence and creative and independent thinking; and to help develop self-awareness and the ability of students to express their thoughts or ideas.\textsuperscript{12}

The benefits to the mentor include acquiring respect, achieving recognition, acquiring a productive collaborator, and feeling needed. The mentor may also gain a sense of personal satisfaction and pride.\textsuperscript{2} The greatest obstacles for the mentor in initiating or maintaining the relationship relate to issues of time allocation, role allocation, competing expectations, and mentor support—including available time and resources.\textsuperscript{13} In a recent survey of General Internal Medicine mentors, mentors supervised a median of 5 mentees each, and would be willing to supervise a maximum of 6 at once.\textsuperscript{14} Mentors with funding had more current mentees (8.3 vs 5.1, respectively; \( P < .001 \)). Overall, 85\% of mentors had co-mentored, and 66\% of mentors had mentored from a distance. Although most mentors found long-distance mentoring to be less demanding, most also said it was less effective for the mentee, and personally less fulfilling.\textsuperscript{14} Common advice sought by mentees relates to work-family balance, the need to cope with rejection (unfavorable reviews of grants and/or manuscripts), the rules of career development, and assistance in career negotiations.\textsuperscript{11} Mentees, too, have responsibilities toward ensuring a successful mentorship relationship; they are listed in Table 2.

Mentees especially value the relationship during transition periods (start of training program, when establishing a career or new professional role, and at times of career and personal change).\textsuperscript{2} Mentors may have greater potential to be role models of mentoring if they enter mentees’ careers during the early period of the relationship characterized by excitement and growth rather than during the later period, termed individuation.\textsuperscript{15,16} As such, the potential for mentees becoming mentors is highest when the age gap between the mentor and protégé is higher, the stakes are lower, the relationship is less complex, and there is less potential for conflict. If one links professorial rank to career stage, social psychology studies suggest that participants used different sources of mentors at different stages of their careers.\textsuperscript{15,16} Additional aspects that may impact the mentorship relationship relate to the environment in which it takes place. An open, collaborative, respectful interdisciplinary environment fosters the development of mentoring.\textsuperscript{17,18} Issues of time and schedule constraints, lack of space, and type of setting do not affect learning in collaborative environments but have a huge impact on students who do not have the benefit of such environments.\textsuperscript{17,18}

In conclusion, both mentors and mentees should evaluate each other carefully before initiating a mentoring relationship. Mentoring relationships often begin with small tasks. Agreeing to and meeting initial mutual expectations are prerequisites for the relationship to progress. Multiple mentors are valuable in providing helpful perspectives and guidance, and different mentors may be sought at different critical periods of one’s professional development. Ongoing effort from both mentor and mentee is critical to achieving a fruitful and sustained relationship that benefits from a supportive environment.

**DISCLOSURE**

The author has no disclosures to make in regard to this article.

**REFERENCES**

Maximizing the relationship with a mentor


Current affiliation: Division of Gastroenterology, McGill University Health Center, McGill University, and the Department of Clinical Epidemiology, McGill University, Montreal, Quebec, Canada.

Copyright © 2006 by the American Society for Gastrointestinal Endoscopy

0016-5107/$32.00
doi:10.1016/j.gie.2006.11.006