

## ORIGINAL ARTICLE

**Ideal Mentor- Perceptions of Faculty and Students**

Shamsunnisa Sadia, Rehan Ahmed Khan, Raazia Rauf, Asma Shaheen, Fareesa Waqar

**ABSTRACT**

**Background:** Mentoring implies a 2-way relationship between the mentor and the mentee. A successful partnership can lead to the professional development of both individuals. Although the significance of mentoring programs has been realized in the developing countries, its role in the holistic development of our students is still not given its due importance. There are important questions to be answered; who should be a mentor? What are the qualities students look for in an ideal mentor? These gaps in research are especially significant in our part of the world, where robust mentoring systems have yet to be established.

**Objective:** To compare the perceptions of our faculty and students regarding the qualities of an ideal mentor as measured by Ideal Mentor Scale (IMS).

**Study Design:** Cross-sectional study.

**Place and Duration of Study:** At Pakistan Railway Hospital, Rawalpindi, Pakistan during July 2013 to August 2013.

**Materials and Methods:** Seventy participants (faculty members:26, students:44) participated in the survey using the "Ideal Mentor Scale" (Gail Rose, The University of Iowa, 1999) to identify the relative importance of integrity, guidance and relationship in a potential mentor using a 5-point rating scale.

**Results:** Integrity (average sum of means: 58) was considered to be the most important attribute of an ideal mentor followed by guidance (40) and relationship (35) by all the participants (undergraduate: postgraduate: faculty member). However, in the scale of relationship the undergraduate students gave higher score than the postgraduates and faculty members (3.8: 3.5: 3.3).

**Conclusion:** Successful mentoring most importantly requires a mentor who can be emulated as a role model due to his/her principled behavior and integrity.

**Keywords:** *Mentoring, mentor, mentee, ideal mentor scale.*

**Introduction**

Mentoring is a core component of the duties of medical school faculty to facilitate successful fulfillment of the academic mission.<sup>1</sup> It is the process whereby an experienced, highly regarded, empathic person (the mentor) guides another individual (the mentee) in the development and re-examination of his or her own ideas, learning and personal as well as professional development.<sup>2</sup> The mentor, who often, but not necessarily works in the same organization or field as the mentee, achieves this by listening or talking in confidence to the mentee.<sup>3</sup>

Mentoring is to support and encourage people to manage their own learning in order that they may maximize their potential, develop their skills, improve their performance and become the person they want to be.<sup>4</sup> This is a two way process. A successful partnership can lead to the professional development of both individuals. Mentors could feel professionally stimulated and perhaps rejuvenated with a feeling that they are giving back to their

professions.<sup>3</sup> Mentees by feeling supported are able to orient themselves faster to the organizational structure, goals and policies and develop confidence in navigating the maze and politics of a medical organization. Mentorship is reported to have an important influence on personal development, career guidance, career choice and research productivity including publication and grant success.<sup>1</sup>

Two main types of mentoring are recognized. Informal mentoring is a voluntary mentorship program in which mentor<sup>5</sup> is selected by mentee while formal mentoring<sup>6</sup> is assigned relationship, associated with organizational program designed to promote mentee's development. The mentor's role is pivotal in this process.

Studies have identified the important qualities of outstanding mentors as described by their mentees' letters of nomination for a prestigious lifetime achievement award in mentorship.<sup>7</sup> The physician-researcher as mentor has at least seven roles to fill: teacher, sponsor, advisor, agent, role model, coach, and confidante.<sup>8</sup>

Although the significance of mentoring programs has been realized in the developing countries, its role in the holistic development of students is still not given

**Correspondence:**

Prof. Shamsunnisa Sadia  
Department of Gynae/Obs  
IIMC-T, Pakistan Railway Hospital, Rawalpindi  
E-mail: drssadia@gmail.com

its due importance.

The newly introduced system of group mentoring in our institute is integral to the induction and supported development of students. Mentors are selected from the institute's faculty who adopt non directive styles concerned with personal and professional change through reflection on experience maintaining a balance of formal and informal arrangements. But there are important questions to be answered; who this person should be? What are the characteristics students look for in a person who they can nominate as their mentor? And do the perceptions of faculty and students regarding an ideal mentor match in our institute?

This study was conducted with the aim to compare the perceptions of our faculty and students regarding the qualities of an ideal mentor as measured by Ideal Mentor Scale (IMS).

**Materials and Methods**

This cross sectional study using “the Ideal Mentor Scale” (Gail Rose, The University of Iowa, 1999)<sup>9</sup> was carried out at Pakistan Railway Hospital, Rawalpindi, Pakistan from July 2013 to August 2013. Approximately 130 questionnaires were distributed and 70 were completed. Out of these 70 participants, 26 were faculty members, 27 postgraduate and 17 undergraduate students.

IMS is a measure designed to help students identify the relative importance of qualities they as individuals most value in a potential mentor. It has 34 structured close ended items generated and refined using the empirical and theoretical literature on mentoring. However in our study the term 'research problem' in the questionnaire was replaced by 'course work.'

The items measured 3 broad attributes or scales of a mentor namely; integrity, guidance and relationship. All items were scored on a 5-point rating scale ranging from 1 (not at all important), 3 (moderately important) to 5 (extremely important). Fourteen items referred to the attribute of integrity while 10 each to guidance and relationship.

Integrity indicates a mentor who exhibits virtue and principled action and can be emulated as a role model. Guidance indicates helpfulness with assignments and learning. Finally, relationship involves addressing personal issues.

To calculate the score for each scale or attribute, the

scores for each item on that particular scale were added together and the count thus acquired was divided by the number of items referring to that scale. Score regarding the attribute of integrity was considered low if it was in the range of 14-28, average: 29-42 or high: 43-80. Similarly for the attributes of guidance & relationship scores were labeled as low: 10-20, average: 21-30 or high: 31-50, respectively.

Data was analyzed using SPSS v.17 statistical package (SPSS Inc., Chicago, IL).

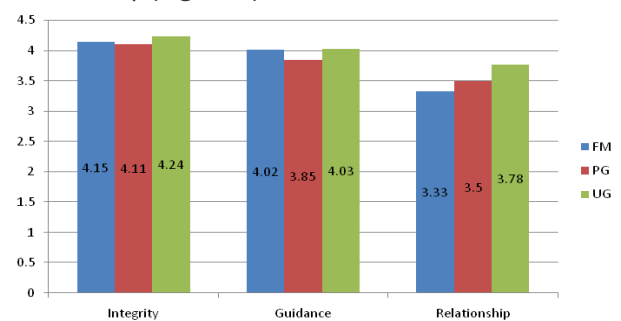
**Results**

All the participants in our study including the faculty, postgraduate and undergraduate students, regarded integrity (average sum of means: 58) as the most important attribute of a mentor followed by guidance (average sum of means: 40) and then personal relationship (average sum of means: 35) (Table: I)

**Table I: Sum of means of items Measuring an Attribute**

Attribute	Faculty (FM) (26)	Post graduate (PG) (27)	Undergraduate (UG) (17)
Integrity (14)	58.04	57.52	59.29
Guidance (10)	40.23	38.52	40.29
Relationship (10)	33.27	34.96	37.82

Although the three groups gave equal relative importance to the three attributes, the undergraduates gave relatively higher score (3.78 vs 3.3 & 3.5) among the 3 groups in the scale of relationship (Figure 1).



**Fig 1: Relative importance of attributes**

In the scale of integrity, item 5 referring to the 'preference to cooperate with others than compete with them' was regarded as the most important attribute of a mentor by the faculty members as against the postgraduates who considered this

to be the least important attribute (Table II).

**Table II: Integrity items with highest and lowest scores in the three groups**

	Item	Score	Importance
FM	5:prefer to cooperate with others than compete with them	4.42	High
	19:advocate for my needs & interests	3.65	Low
PG	10: be calm & collected in times of stress	4.48	High
	3:give proper credit to students	3.96	Low
	5:prefer to cooperate with others than compete with them	3.96	Low
UG	3: give proper credit to students	4.65	High
	21: generally try to be thoughtful & considerate	3.53	Low

As evident from Table: III and IV, the faculty and students generally gave the highest and lowest scores to the same items in the scale of guidance and relationship.

**Table III: Guidance items with highest and lowest scores in the three groups**

	Item	Score	Importance
FM	34: be generous with time & resources	4.23	High
	27:meet on a regular basis	3.81	Low
PG	34: be generous with time & resources	4.33	High
	2: give specific assignments related to course work	3.48	Low
UG	9: brainstorm solutions to a problem concerning course work	4.47	High
	2:give specific assignments related to course work	3.59	Low
	27:meet on a regular basis	3.59	Low

**Table IV: Relationship items with highest and lowest scores in the three groups**

	Item	Score	Importance
FM	22:cheerful, high-spirited person	3.92	High
	30:help me to realize my life vision		
	20:talk to me about his/her personal problems-low		
PG	22:be a cheerful, high-spirited person	4.22	High
	20:talk to me about his/her personal problems	2.37	Low
UG	22:be a cheerful, high-spirited person	4.53	High
	20:talk to me about his/her personal problems	3.06	Low

**Discussion**

Scholars have demonstrated that one of the most important factors that students use to ascertain the quality of their educational experience is their relationship with faculty.<sup>10</sup> Without a doubt, research on faculty-graduate student relationship has provided extremely valuable insights about effective practices that foster the success of students.<sup>11</sup> Research indicates strong agreement among candidates that the ideal mentor would exhibit attributes such as being experienced in their discipline, intellectual curiosity, effective communication, belief in student's capabilities and honest feedback. While these attributes are central to an ideal mentoring relationship, often such relationships can encompass a wider variety of functions. Furthermore, there are individual differences among candidates with respect to the type of mentoring functions they prefer. The Ideal

Mentor Scale helps students identify the relative importance of several mentor functions and characteristics.

High scores in the scale of integrity indicate a preference for a mentoring style characterized by respectfulness for self and others and empowerment of protégés to make deliberate, conscious choices about their lives.

High scores in the scale of guidance indicate a preference for a mentoring style characterized by helpfulness with the tasks and activities typical of graduate and postgraduate study.

High scores in the scale of relationship indicate a preference for a mentoring style characterized by the formation of a personal relationship involving sharing such things as personal concerns, social activities, and life vision or world view.

Mentoring is very complex.<sup>12</sup> It varies from one situation to another. It is interpreted in different ways by different people.<sup>13</sup> Studies have indicated that medical students characterize mentoring in terms of the interpersonal dynamics of the relationship emphasizing personal connectivity and advocacy.<sup>14</sup> In the same line, a review endorses that successful mentoring requires commitment and interpersonal skills not only of the mentor but also the mentee.<sup>15</sup> Though, relationship was significantly related to student satisfaction with their mentor in literature, in our study not only students but faculty as well considered relationship to be the least important of the three attributes in a mentee-mentor interaction.

A recent study in North America found that successful mentoring relationships were characterized by reciprocity, mutual respect, clear expectations, personal connection, and shared values. In the same study, failed mentoring relationships were characterized by poor communication, lack of commitment, personality differences, perceived (or real) competition, conflicts of interest, and the mentor's lack of experience.<sup>16</sup> However, though the faculty members in our survey gave the highest importance to the attribute of 'preference to cooperate with others than compete with them', the undergraduates did not which indicate differing mentoring needs at various stages of professional life. Other studies also recognize the changing need for precepting and

mentoring with time.<sup>17</sup>

Among the three attributes of an ideal mentor explored by IMS in our study, all the three groups considered relationship to be the least importance. However, within the scale of relationship undergraduate students rated relationship higher than postgraduates and faculty members. This is supported by other studies as well.<sup>18</sup> Evidence confirms that the relative effect of mentoring on the mentor and protégé outcomes differs by the types of mentoring functions.<sup>19</sup>

Development of criteria for choosing a mentor should be done in the light of the perceptions of medical students along with that of the faculty as this knowledge will foster more meaningful discussion and assist in developing mentoring programs in our part of the world.

### Conclusion

Successful mentoring most importantly requires a mentor who can be emulated as a role model due to his/her principled behavior and integrity.

The mentor's commitment to guide the mentee through the maze of academic challenges of a medical organization is more important than his/her interpersonal skills.

Faculty and students have similar perceptions regarding the relative importance of integrity, guidance and relationship in an ideal mentor.

Educating and empowering students along with faculty education regarding students' needs may improve mentoring.

### Acknowledgement

We acknowledge the contribution of Mr Mohammad Nadeem in statistical analysis of the data.

### REFERENCES

1. Sambunjak D, Straus SE, Marusic A. Mentoring in academic medicine: a systematic review. *JAMA* 2006; 296(9):1103-15.
2. Ali PA, Panther W. Professional development and the role of mentorship. *Nursing Standard* 2008; 22:359.
3. Ramani S, Gruppen L. Mentoring. In: Dent JA, Harden RM, editors. *A practical guide for medical teach*. 3<sup>rd</sup> edition. Churchill Livingstone Elsevier Ltd; 2009. p 151-7.
4. Crisp G, Cruz I. Mentoring College Students: A Critical Review of the Literature Between 1990 and 2007. *Research in Higher education* 2009; 50(6):525-45.
5. Ehrich LC, Brian H. Informal mentoring in academia. *The International Journal of Mentoring and Coaching* 2008; 6(2):14-27.
6. Wang S, Tomlinson EC, Noe RA. The role of mentor trust and protégé internal locus of control in formal mentoring relationships. *Journal of Applied Psychology* 2010; 95(2): 358-67.
7. Cho CS, Ramanan RA, Feldman MD. Analysis of the Characteristics of Outstanding Mentors. *The American Journal of Medicine* 2011; 124: 453-8.
8. Tobin MJ. Mentoring: seven roles and some specifics. *American Journal of Respiratory and Critical Care Medicine* 2004; 170(2): 114-7.
9. Rose GL. Enhancement of Mentor Selection Using the Ideal Mentor Scale. *Research in Higher Education* 2003; 44 (4):473-94.
10. Lechuga VM. Faculty graduate student mentoring relationships: mentors' perceived roles and responsibilities. *High Educ* 2011; 62(6): 757-71.
11. Komarraju M, Musulkin S, Bhattacharya, G. Role of student-faculty interactions in developing college students' academic self-concept, motivation, and achievement. *Journal of College Student Development* 2010; 51:332-42.
12. Allen TD, Eby LT. Factors related to mentor reports of mentoring functions provided: Gender and relational characteristics. *Sex Roles* 2004; 50:129-39.
13. Bell-Ellison BA, Dedrick RF. What do Doctoral Students Value in their Ideal Mentor? *Research in Higher Education* 2008; 49 (6):555-67.
14. Hauer KE, Teherani A, Dechet a, Aagaard EM. Medical students' perceptions of mentoring: a focus-group analysis. *Med teacher* 2005 Dec; 27(8):732-4.
15. Sambunjak D, Straus SE, Marusic A. A systematic review of qualitative research on the meaning and characteristics of mentoring in academic medicine. *Journal of general internal medicine* 2010; 25(1):72-8.
16. Straus SE, Johnson MO, Marquez C, Feldman MD. Characteristics of successful and failed mentoring relationships: A qualitative study across two academic health centers. *Academic Medicine* 2013; 88(1):82-9.
17. Smith SK, Hecker-Fernandes JR, Zorn C, Duffy L. Precepting and mentoring needs of nursing faculty and clinical instructors: fostering career development and community. *J Nurs Educ* 2012; 51(9):497-503.
18. Finkelsteina LM, Allenb TD, Ritchiec TD, Lynch d JE, Monteie MS. A dyadic examination of the role of relationship characteristics and age on relationship satisfaction in a formal mentoring programme. *European Journal of work and organizational psychology* 2012; 21(6):803-27.
19. Chun JUK, Sosik JJ, Yun NY. A longitudinal study of mentor and protégé outcomes in formal mentoring relationships. *Journal of Organizational Behavior* 2012; 33(8):1071-94.