

WHAT IS MENTORING?

Mentoring is an interpersonal, developmental relationship that exists to benefit the mentee.

The Functions of a Faculty Mentor

1. Career Enhancing Mentoring – those aspects of the relationship that enhance learning the ropes, strengthening professional skills and scholarship, and preparing for advancement in the organization and within the mentee’s professional field.
2. Psychosocial Mentoring - those aspects of the relationship that enhance a sense of competence, clarity of identity, and effectiveness in a professional role.
3. Networking – exposure to positive, career-building opportunities (individuals and resources) at the right time.

Often no single individual can provide all of the guidance that a mentee needs. Best mentoring practices utilize an array of Mentoring Approaches:

- One-on-one – traditional mentoring where a more experienced individual (mentor) provides guidance to a less experienced individual (mentee)
- Committee – A group of experienced faculty members provides guidance to one or more junior faculty members in the department
- Group – one individual serves as mentor to several mentees in a facilitated group
- Peer Group – mentor pairs form based on similar experience level or common interests
- Zone – mentoring by area of expertise
- E-Mentoring (or Distance Mentoring) – employed when mentoring partners are unable to meet in person
- Workshops and Panel Discussions – important complements to other forms of mentoring

The strongest predictor of satisfaction with mentoring reported by Assistant Professors in academic medicine was the number of different types of mentoring received (Wasserstein et al., 2007).

The Functions of a Mentee

1. Proactive responsibility for their career development
2. Openness to feedback and understanding the expectations of the mentor
3. Engage in self-reflection and align career plan with individual strengths

Factors Associated with High Quality Mentoring Relationships	
<u>Strong Association</u> <ul style="list-style-type: none">• Deep level similarity (e.g., attitudes, values, work styles, personality)• Interaction frequency• Relationship length (takes time for the relationship to develop)• Supportive mentoring culture	<u>No or Weak Association</u> <ul style="list-style-type: none">• Surface level similarity (e.g., demographic similarity)• Mentor or mentee technical skill or ability• Formal versus informal relationship (i.e., assigned mentors versus naturally formed relationships)

Wasserstein AG, Quistberg DA, and Shea JA. (2007). Mentoring at the University of Pennsylvania: results of a faculty survey. *Journal of General Internal Medicine* 22(2):210-4.

Eby LT¹, Allen TD, Hoffman BJ, Baranik LE, Sauer JB, Baldwin S, Morrison MA, Kinkade KM, Maher CP, Curtis S, Evans SC. (2013). An interdisciplinary meta-analysis of the potential antecedents, correlates, and consequences of protégé perceptions of mentoring. *Psychol Bull.* 2013 Mar;139(2):441-76

Eby LT, Allen TD, Evans SC, Ng T, Dubois D. (2008). Does Mentoring Matter? A Multidisciplinary Meta-Analysis Comparing Mentored and Non-Mentored Individuals. *J Vocat Behav.* 2008 Apr;72(2):254-267

Kram, K.E. (1985). *Mentoring at work: Developmental relationships in organizational life.* Glenview, IL: Scott Foresman and Company.

This document was created in joint collaboration between the UNC School of Medicine
Mentoring Task Force and the UNC Center for Faculty Excellence