Mentoring Toolkit For Mentors

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GWIMS Toolkit
Topics Covered

1. Why Engage In Mentoring Women Faculty, Fellows and Students?

2. Essential Elements of Mentoring Women to Achieve Career Satisfaction and Success

3. Mentoring Women Faculty: Issues Related to Cross-Gender Mentoring

4. Maximizing Your Success As A Mentor

5. Mentoring Women Trainees
Why Engage in Mentoring of Women Faculty, Fellows and Students?
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- Women make up nearly half of the medical students and over half of the biomedical sciences graduate students today, yet the percentage of faculty in academic medical centers that are women is only 38% (AAMC, 2014; National Academy of Sciences et al., 2007); an increase of only 8% in the last 10 years (AAMC, 2014).

- Women faculty continue to be overly represented at the instructor and assistant professor faculty ranks (65% of all women faculty are at these ranks), with significantly decreasing representations at the higher ranks; only 13% of women faculty are full professors compared to 30% of male faculty at that rank.
Why Engage in Mentoring of Women Faculty, Fellows and Students?

- There has been little change in the representation of women on faculty in the past 10 years within academic medicine (AAMC, 2014). This fact remains despite adjustment for productivity, faculty track, specialty or other factors (Reed et al., 2011; Wright et al., 2003).

- Women remain disadvantaged compared to men in terms of mentoring, compensation, unconscious biases, and resources (Bickel, 2000, 2002; Dannels et al., 2009; Pololi and Jones, 2010; Wright et al., 2003).

- Women faculty continue to face many obstacles that decrease their satisfaction and retention in academic medicine (Cropsey et al., 2008; Shollen et al., 2009).
Why Engage in Mentoring of Women Faculty, Fellows and Students?

- Mentoring increases faculty productivity, career advancement, and career satisfaction (e.g., National Research Council, 2010; Pololi et al., 2002; Shollen et al., 2014), yet women have reduced access to mentoring (Bickel, 2000; Bickel et al., 2002; Blood et al., 2012; Hill et al., 2010; National Academy of Sciences et al., 2007).

- The objective of the Mentoring Toolkit for Mentors is to assist senior faculty in understanding the importance of mentoring women and identifying ways to accomplish it.

- This Toolkit is divided into different topics that cover a range of important issues related to mentoring women in academic medicine.
Essential Elements of Mentoring Women to Achieve Career Satisfaction and Success
Essential Elements of Mentoring Women to Achieve Career Satisfaction and Success

As careers in academic medicine continue to be challenging, mentoring women is a key approach to creating a positive environment that will empower a sense of satisfaction with one’s professional accomplishments – such as publication of an exciting research finding; development of an educational program; or progression of a professional student, postdoctoral trainee or clinical fellow; or one’s selection to a national committee in their professional organization (i.e. a study section appointment); obtaining a research funding award; appointment on an institutional committee.

• Academic medicine can be a dynamic and stimulating career choice
There are challenges along the way in an academic career...

Academic careers are, at times, much like an exciting rollercoaster ride – with ups and down, as well as highs and lows, with twists and turns.

In order to be fully prepared for developing resilience and staying power as a faculty member, mentoring has become increasingly important as a necessary tool to enable the successful navigation of an academic career – especially as the environment in the academic medical enterprise continues to face challenges.
Mentoring throughout a professional career is a critical key to success, long-term satisfaction, retention and gaining new skills for each phase of one’s career journey.
A. The Mentor’s Perspective

All mentors should keep in mind that mentorship refers to a dynamic, collaborative, reciprocal, and sustained relationship in which the mentor assists and guides another colleague, typically a more junior colleague, to the acquisition of what they need for success – what is needed to be a successful professional.

*Modified from Abedin et al., 2012*
Mentors need to know their roles and responsibilities with mentees

From the work of Dr. Kram (1988), attention to career functions and psychosocial functions are needed for success in an organizational life.

Career functions serve to provide the mentee with tools and information to advance

Psychosocial functions contribute to establishing and maintaining self-worth and confidence both inside and outside the organization

As a mentor of women, it is critical to note that attention is needed to both domains; should a mentor focus only on one domain (i.e. the technical side of being in a unit), the early career stage faculty member may not feel appreciated or valued in their new community.
So what are roles and responsibilities of mentors?

Attention is needed to an effective mentoring relationship that include:

- Mutual respect
- Mutual commitment
- Maintain confidentiality
- Identification of shared goals
- High standards
- Realistic expectations
- Effective communication
- Commitment to a regularity of interaction

Overall: **Mutual Trust**
Mentors may need to have different roles with different skills sets including...

Observable behaviors as:

**Coach** — who can engage with or observes mentee during their work and provides constructive feedback

**Counselor** — who listens actively and encourages self-reflection as well as attention to short- and long-term goals

**Sponsor** — enables new networks and opportunities, serving as an advocate for the mentee
Mentors also need to develop their skills...

Being an effective mentor requires attention to essential qualities or competencies of Mentorship.

Example: Developing a mutual understanding of goals and expectations

The mentor can ensure that the mentee is encouraged to bring her goals to the initial conversations with the mentor. Set the stage for understanding each other’s respective viewpoints can launch a relationship in a highly effective manner that is primed and ready to flourish.
Consider the positive benefits for being a mentor

Mentors can enhance their personal and professional source of career satisfaction –

**Generativity** inherent as mentor can be an accomplishment in which the pride in the success of a mentee can be rewarding

**Learning from the mentee** with their unique perspective can open new venues, provide new insights, information and fresh ideas for stimulating one’s own creativity in the academic medical setting
B. The Mentee Perspective

The roles and responsibilities of an effective mentee are very similar to that of the mentor –

Key is to establish and communicate your own expectations for the mentoring relationship (do not leave this to one’s imagination…)

- Establish the goals of the relationship
- Discuss the scope of the relationship (boundaries)
- Frequency and format for meetings, including preferences for communication
- Demonstrate commitment
- Maintain confidentiality
- Seek mutual feedback, respect and trust
What are positive benefits for the mentee?

Dynamic mentoring relationships can provide you with

- **Confidence** that you are on track
- **A safe haven** to test your ideas and plans
- Encouragement to take a risk or move ahead
- **Critical feedback** on what is going on in the organization (local and national) or your behaviors
- **Sponsorship and recognition** within your profession
- **A colleague** with whom you can **celebrate your success**!
C. The Organizational Perspective

Why is mentoring so important to the overall success of an organization?

Academic medicine is a challenging career and junior faculty require support for their professional growth, development, and retention.

- Mentees need to develop confidence in finding their own solutions
- Mentees need to develop their own leadership skills, style and unique niche
- Mentees need support to sustain active participation and avoid burnout
Mentoring is key to success of one’s organization and to achieving one’s missions

Mentoring helps to create a culture where communication flourishes so the workplace is a desirable environment

Women faculty are needed who will discuss the undiscussable and counteract organizational silence to transform their academic environment into a dynamic, learning environment for all (Dankoski et al., 2014).
Mentoring Women Faculty: Issues Related to Cross-Gender Mentoring
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- All faculty regardless of gender encounter challenges in their paths to a successful career in academic medicine.

- Now more than ever, significant changes in healthcare delivery, clinical reimbursement, research funding, and medical curriculum models, stress our systems and our faculty.

- In addition to these challenges, women in academic medicine face additional challenges and decisions that can add weight and stress to their already burdened shoulders, leading to burn out and departure from an academic medical career.
Mentoring Women Faculty: Issues Related to Cross-Gender Mentoring

Some of these added challenges include:

1) Male faculty are primarily “career oriented” while many female faculty are primarily career and family oriented” (Bland et al., 2009; Humphrey & Smith, 2010).

2) Women have to take into consideration promotion and tenure clock limits and provisions while navigating their personal decisions regarding family time (Bland et al., 2009; Humphrey & Smith, 2010).

3) Gender bias, discrimination, and sexual harassment remaining challenging for women faculty in academic medicine (Bland et al., 2009; Humphrey & Smith, 2010; Kram, 1988).
Mentoring Women Faculty: Issues Related to Cross-Gender Mentoring

4) Women often negotiate poorly for resources (e.g., staff/technical support, laboratory space, research support, or salary) (Humphrey & Smith, 2010).

5) Women faculty are less likely to be networked and are less likely to be sponsored/nominated or to proclaim their accomplishments (Bland et al., 2009; Humphrey & Smith, 2010).

These issues are pursued further in the following slides.
Cross-Gender Mentoring: “Career Oriented vs “Career and Family-Oriented”

• Mentors need to be respectful and sensitive to supporting their mentees choices of orientation regardless of the mentor’s orientation.

• In particular, mentors should work toward improving institutional culture and policies regarding work/family struggles.

• Additionally, mentors should educate themselves on institutional resources, policies, and practices regarding family leave, child care, part-time faculty status, and alternative career paths so that they can help their mentee integrate their lives successfully.
Cross-Gender Mentoring: Consideration of Promotion, Tenure Clock Limits and Personal Decisions of Family Time

- Mentors need to understand their institutional policies on timing of promotion, changing career tracks, and tenure clock possibilities to assist their mentee in making the best choices for her situation.

- Women faculty may not be able to give as much effort as may be needed in their scholarly pursuits for promotion due to family issues. Helping mentees identify alternative ways to evidence productivity is particularly critical for primarily clinical faculty.

- Because women faculty with children may fall behind in acquiring the appropriate requirements for promotion, their mentors should be sure that their mentee understands the promotion requirements of their specific career path and annually review their mentee’s appropriateness for promotion to help them keep on track.
Cross-Gender Mentoring: Gender Bias, Discrimination and Sexual Harassment Challenges Remain

- Mentors should become sensitive to discriminations and conscious or unconscious biases against women that exist within their institution and themselves.

- Mentors need to support and validate their mentees concerns and complaints about experiencing any of these issues.

- Mentors need to be aware of institutional policies and resources regarding these circumstances to assist their mentee in handling their particular situation.
Cross-Gender Mentoring: Gender Bias, Discrimination and Sexual Harassment Challenges Remain

- Mentors should work toward not only raising awareness of the fact that women still face these issues in academic medicine, but also work toward eliminating these factors from the work environment.

- Mentors need to be aware of the power differential (social, positional, etc.) between their mentee and themselves that needs to be managed carefully in cross-gender mentoring relationships.
Cross-Gender Mentoring: Women Often Negotiate Poorly for Resources

• Mentors should work with their mentee to fully understand their mentee’s resource needs/desires and their negotiated or provided resources to conduct their activities.

• Mentors need to advise and guide their mentees in obtaining additional needed resources to be productive. Actively advocating for additional resources for their mentee may also be required by the mentor.

• Mentors need to introduce their mentees to opportunities that may expand their resources (e.g. collaborators, peers, bridge funding, grant mechanisms).
Cross-Gender Mentoring: Women Faculty are Less Likely to be Networked, Sponsored/Nominated or Proclaim Their Accomplishments

- Mentors need to guide their mentees in determining which institutional committees or projects are worthwhile or important to consider agreeing to or avoiding.

- Mentors should advise their mentees on unwritten rules of the institution (e.g. working from home, availability to students, acceptance of bringing family members to work).

- Because women often are poor self-promoters, mentors can look for opportunities to publicly support their mentee (e.g., advocacy through nominations for awards, projects, or committees to raise mentee visibility and recognition) and teach their mentees the art of graceful self-promotion.
Cross-Gender Mentoring: Women Faculty are Less Likely to be Networked, Sponsored/ Nominated or Proclaim Their Accomplishments

- Mentors need to nominate/sponsor their mentee to expand their networks (e.g., for local/regional/national service opportunities, grant or manuscript reviews, scientific meeting presentations; see Travis et al., 2013) and include their mentee in networking opportunities (e.g. social events, introduction to colleagues). These actions are especially critical for women faculty who may not travel as much to meetings or who have not become active in specialty or scientific organizations.
Cross-Gender Mentoring: Additional Challenges to Women’s Potential Career Success and to Cross-Gender Mentoring

- Cultural taxation (Bland et al., 2009)
  - an obligation to serve on committees needing a woman representative

- Feelings of isolation (Bland et al., 2009)
  - related to few other women in their department or lack of a collegial network

- Success as a barrier (Bland et al., 2009)
  - related to violating stereotypes of how women should act

- Public scrutiny (Kram, 1988)
  - how others see the mentoring relationship
Cross-Gender Mentoring: Additional Challenges to Women’s Potential Career Success and to Cross-Gender Mentoring

- Limitations of role modeling (Kram, 1988)
  - women face some dilemmas that are unique to being female

- Assuming stereotypical roles for male mentors and female mentees (Kram, 1988)
  - defined by assumptions and expectations of appropriate behavior for each gender
MAXIMIZING YOUR SUCCESS AS A MENTOR
Here are some skill sets, techniques and tips that you as a mentor may find useful in your mentoring relationship.

A. Active Listening And Other Communication Skills
   http://www.mindtools.com/CommSkill/ActiveListening.htm
   http://www.skillsyouneed.com/ips/active-listening.html

B. Mentoring Competencies & Self-Assessments
   http://pcaddick.com/page19.html
   http://www.mccneb.edu/sos/advising/mentorselfassessment.asp
   https://mentoringresources.ictr.wisc.edu/EvalTemplates
   https://mentoringresources.ictr.wisc.edu/CoreCompetencies
   http://www.go2itech.org/HTML/CM08/toolkit/training/
MAXIMIZING YOUR SUCCESS AS A MENTOR

C. Helping Your Mentee Create A Developmental Career Plan
   http://hrweb.berkeley.edu/learning/career-development/career-management/planning/action-plan
   http://careers.bmj.com/careers/advice/view-article.html?id=1446

D. Coaching vs Mentoring
   http://www.management-mentors.com/resources/coaching-mentoring-differences/
   http://www.coachingandmentoring.com/Articles/mentoring.html
   http://www.brefigroup.co.uk/coaching/coaching_and_mentoring.html
MAXIMIZING YOUR SUCCESS AS A MENTOR

E. Mentoring Behaviors To Embrace & Behaviors To Avoid
   http://pcaddick.com/page2.html
   http://gvsu.edu/leadershipuniversity/effective-vs-ineffective-mentoring-behaviors-52.htm
   http://www.wakehealth.edu/JUMP/Negative-Mentoring.htm
   http://www.wakehealth.edu/JUMP/Mentor-Roles.htm

F. Sponsorship
   http://www.ncbi.nlm.nih.gov/pubmed/?term=travis+e+and+sponsorship
G. Institutional Validation of Your Role as a Mentor

- List your mentees in your CV (see next slide)
- Include your mentoring activities in your annual performance review
- List metrics associated with your mentoring relationship(s) (e.g. grants, manuscripts, presentations, awards, promotions, national recognition, leadership roles, innovative clinical care/services etc.) that you or your mentee received or produced through your mentoring relationship
- Consult with your Faculty Affairs Dean for ways to demonstrate your role as a mentor at your specific institution
CV example of validating your mentoring activities:

Mentoring/Advising:

Mentoring Faculty:

2000-2004 Founder and Director, Mentoring Program for Women Junior Faculty, Women’s Health Center of Excellence for Research, Leadership, Education

2000-2007 Mentor to XXX M.D., Department of Radiology, Providing career advice and counsel, assist in development of promotion portfolio

2005-2013 Mentor to XXX, Ph.D., Department of Internal Medicine, Providing career advice and counsel

2007-2012 Mentor to XXX, Ph.D., Department of Otolaryngology Providing career advice and counsel, assisted with grant application that received funding

2010-2015 Mentor to XXX, Ph.D. Department of Radiation Oncology Providing career advice and counsel
Mentoring Women Trainees
Mentoring Women Trainees

Congratulations on your decision to serve as a trusted mentor for a woman trainee!
You are making an important and generous contribution to the professional development, success and career satisfaction of an individual who is the future of academic medicine.
Tips to guide your new mentorship relationship

This section of the GWIMS Mentoring Toolkit for Mentors is designed to assist you in your role as a mentor – and the multiple roles you will likely serve as a Coach, Counselor and Sponsor to your more junior colleague.

Topics to be addressed include:
• Checking your availability
• Setting goals and expectations
• Mentoring across differences
• Providing guidance and feedback
• Using your network to empower your trainee
A. Checking your availability as a mentor

Time and attention to meeting the needs of your trainee will be required of you for a successful and effective mentoring relationship. So several questions to reflect upon before the decision to mentor a trainee is finalized.

Key Questions:

1. Do you have the time in your own career to accommodate a new relationship?

2. Do you consider this mentoring relationship to be a good match for both you and your mentee? (Consider what you might learn from your mentee).

3. Do you have a clear understanding of the mentoring needs of your trainee and ideas on how you might address them?

4. Are your enthusiastic, positive and willing to support a women trainee in a mentoring relationship?
B. Setting goals and expectations for the mentoring relationship

Strategies to set the stage for a successful and satisfying mentoring relationship include:

- Discuss mutual expectations, boundaries, ethics and vision

- Establish, clarify and write down mutually agreed-upon steps and approaches to achieve the vision

- Build an understanding of the personal goals and expectations of this mentoring relationship

- Begin a dialogue to share career goals and aspirations

- Discuss and agree upon a schedule for meeting together
Skills for mentors: preparing for the first meeting

Consider what you might include in a first meeting:

- Obtain and review your mentee’s CV
- Share information about your professional and personal life
- Learn something new about your mentee
- Review expectations and ground rules for the relationship (frequency of meetings, email versus face-to-face discussions, important issues with your own professional schedule, how best to contact each other)
Skills for mentors: setting expectations

Define clearly…

- Scope of the mentoring relationship
- Scheduling and logistics for meetings
- Frequency and mode of communication between meetings
- Responsibility for rescheduling any missed meetings
- Commitment to confidentiality and “Off-limits” conversations

Consider use of a written mentoring agreement
New mentoring relationships benefit from a discussion about communication

- Seek to identify respective preferences
- Clarify expectations for communication
  - Frequency of meeting
  - Confidentiality
  - Mutual feedback
- Develop an initial plan for communication
- Recognize that this plan will likely need to be adjusted in the future – as it is a starting point
C. Mentoring across differences

Useful discussions have considered gender differences in mentoring. Age and experience are other factors for consideration.

However, the visible differences between a mentor and mentee are sometimes the easiest to assess, discuss and learn from.

Much more difficult are the “invisible” differences

- Differences in work styles
- Differences in capacity, energy and drive
- Differences in temperaments
- Differences in defining success
Addressing “invisible” differences in a mentoring relationship

Personal skills including active listening by the mentor can be critical to enabling a women trainee to feel comfortable with differences.

Skills to bridge differences effectively include:

- Non-judgemental
- Altruistic
- Patient
- Honest
- Reliable
- Motivator
D. Providing guidance and feedback for a trainee

The mentoring skills of a coach, counselor and sponsor are important as is the manner in which ideas, advice, and reflection are provided.

So set the stage for focused discussions so that you and your trainee will be able to discuss what maybe be difficult issues.

Remember your role as a mentor is to ask good questions – and not to make decisions for the mentee.
Providing effective feedback requires giver and recipient to be allies with common goals

Feedback on one’s performance is a means by which we receive data to bring about a change and improve as a professional.

Trainees are frequently new to the concept of feedback – so mentors will need to discuss how they may serve as an observer who can provide constructive feedback in order for the recipient to receive data that can bring about a change.

Mentor – Provides observation of performance
Mentee – Receives feedback and chooses response
E. Using your network to empower your mentee

Effective mentoring of women trainees should include attention to **Sponsorship**.

Observable behaviors of the Mentor as Sponsor include:

- Facilitation of “referrals” to a trainee
- Involvement of trainees in a project
- Provides introduction of a trainee to leaders in the professional field
- Advocates for the trainee, thereby opening up new opportunities for broadening networks and connections and/or collaborations
- Facilitates nomination for awards, committees, key positions
Mentors can encourage women trainees to network

Mentors can provide a visible demonstration of effective networking –

Consider situations where you and your trainee can attend an event, meeting and/or conference together – and introduce your trainee as a colleague.

**Networking Venues**
- Social events
- Local seminars
- National/international conferences
- Committee service
- Research collaborations
Concluding Statements

In these challenging times of academic medicine, mentorship for our women faculty is critical for their success.

Nationally women make up only 38% of faculty and occupy ~15% of senior leadership positions in academic medicine. These low numbers have significant negative impact on all missions of academic medical institutions, on our patients, and on society at large.

Senior faculty need to realize that it is time to embrace the theme of “It Is Not About Me” and step up to the plate to mentor our women junior faculty to help them be successful in their chosen career paths. This Mentor’s Toolkit will help you.

Mentoring our women faculty is some of the most important work that we can do to continue to diversify ourselves and to serve our diverse patient populations.
References


References


Acknowledgments

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Author Biography

Mary Lou Voytko, Ph.D., is a tenured Professor in the Department of Neurobiology and Anatomy and Director of the Office of Women in Medicine and Science (OWIMS) at Wake Forest School of Medicine (WFSM). Dr. Voytko received her Ph.D. in Anatomy from the State University of New York Health Science Center at Syracuse and conducted postdoctoral work at The Johns Hopkins School of Medicine, before joining the WFSM faculty. Her major field of research is investigating the neural basis of age-related cognitive dysfunction. Nationally, Dr. Voytko has organized 12 professional development workshops or conferences and represented WFSM at the National Workshop on Mentoring held in Washington, DC in 1998. She was a Fellow of the 2002-2003 class in the Hedwig van Amerigen Executive Leadership in Academic Medicine (ELAM) Program for Women and has served on their National Advisory Committee and their Admissions Committee. She has been a member of the Women Executives in Science and Healthcare organization since 1999, serving as Program Committee Chair through Immediate Past President of that organization from 2005-2010.
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Joan M. Lakoski, PhD, is Vice President of Research and Graduate Education and Chief Science Officer at the American Association of Colleges of Pharmacology. She previously served as the Associate Vice Chancellor for Academic Career Development at the University of Pittsburgh Schools of the Health Sciences, and the Associate Dean for Postdoctoral Education, Professor of Pharmacology and Chemical Biology, and Professor in Clinical and Translational Sciences at the University of Pittsburgh School of Medicine. Dr. Lakoski received her doctoral degree in pharmacology from the University of Iowa, completed postdoctoral training in the Department of Psychiatry at the Yale University School of Medicine, and has held faculty positions at the University of Texas Medical Branch in Galveston and the Pennsylvania State University College of Medicine, including appointment as interim chair of the Department of Pharmacology at Penn State. Dr. Lakoski was the Founding Executive Director of the Office of Academic Career Development (2002-2009) and the Office of Science Education Outreach (2010-2014) at the University of Pittsburgh.