

Mentorship: A Critical Component for Professional Growth and Academic Success

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Abstract: Faculty in a twenty-first century school of dentistry face a variety of daily challenges. Balancing teaching, research, and scholarship can be an overwhelming task for junior faculty and is influenced by the environment and the interactions we have with colleagues. Effective mentorship can play a critical role in professional growth and development as well as academic success. Excellent mentors provide a distinct vision and can guide their protégés to achieve the goals associated with these visions. Current literature supports the definitive characteristics that potential protégés and effective mentors exhibit and delineates how mentoring can enhance productivity, efficiency, and motivation. There is also evidence that formal mentoring programs have an overall positive impact on junior faculty and may assist in retention of dental school faculty. Successful mentors take protégés under their wings for guidance, inspiration, and encouragement and in the process create motivated, productive, and successful teachers and researchers, thus leaving a legacy. The purpose of this paper is to review the literature regarding the importance and benefits of excellent mentorship.

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Faculty in a twenty-first century school of dentistry face a variety of daily challenges. The students are, of course, faculty members' first priority. Transfer of knowledge and the difficulties related to developing critical thinking skills and independent learning are very serious business. Along with the responsibilities of teaching, we strive for our own professional growth through scholarly activities and service to the institution as well as the greater university. Having a sense of accomplishment in all of these areas is important. Balancing these activities can be overwhelming at times and is influenced by the environment of the school and the interactions we have with colleagues. The past two years of my dental education career have been significantly different, and as I analyzed what had made a difference, I realized a single most notable change: I now have the guidance and dedication of an encouraging and inspiring mentor.

Authors in all disciplines have written about people who have changed their lives, referring to these individuals as mentors. As long ago as 1978, the *Harvard Business Review* noted that "everyone

who makes it has a mentor."¹ Other surveys and studies of accomplished individuals have reported that influential mentors were second in importance only to education as a factor in their career success.² Mentors have the ability to inspire confidence in others, push them to their limits, and continue to develop them to their greatest potential. How is this accomplished?

Mentors are people who can see more in you than you see in yourself. They create a vision and development plan that take advantage of your own strengths, abilities, and potential for growth. Effective mentors are so unshakably convinced that we have greatness in us, and their vision of what is possible is so clear and powerful, that they wind up convincing us too.³

An effective mentor will facilitate the development of independence, self-confidence, job satisfaction, upward mobility, and decision-making/problem-solving skills in the protégé.⁴ The goal of this article is to share the importance and benefits of providing mentorship for dental educators, thus reinforcing the theme of the 2004 ADEA Annual Session,

“Mentoring: Leadership, Learning, Legacy,” which has been a primary focus of the presidential year of Dr. Paula Friedman, ADEA President 2003-04.

Leadership: When the Student Is Ready, the Teacher Will Appear

In many instances, perceptions of protégé-mentor relationships focus primarily on mentors and their role in initiating a relationship. However, the role of the protégé in establishing this relationship is also critical. There is evidence that there should be accountability on the part of the protégé to attract a good mentor. Mentors want to associate with winners, with rising stars, so that some of the stardust will brush off on them.⁵ Although an individual may not be seeking mentorship, the characteristics he or she exhibits are specifically those that have been delineated as qualities for attracting a mentor. These qualities have been identified as willingness to assume responsibility, receptivity to feedback, self-perceived growth potential, ability to perform in multiple skill areas, and a history of seeking new and challenging assignments.⁶ Other qualities for attracting a mentor are listed in Table 1.

Potential protégés may exhibit many of these qualities, and they are very eager to learn from the leaders in the field. Mentoring has been described as going above and beyond. Stone states that successful mentors share their experience, wisdom, and political savvy to enable their top performers to take on tasks beyond those designated in their job descriptions.⁷

The most effective mentor relationships evolve from a natural affinity between two individuals. They begin to interact informally, generally after the two individuals have worked together for a while and developed mutual respect. Wellington reports that talent usually draws the mentor to the protégé, and accomplishment and power draw the protégé to the mentor.⁵ Jackson et al. concluded that effective mentoring requires a certain chemistry for an appropriate interpersonal match and that prized mentors have “clout,” knowledge, and interest in the protégé, providing both professional and personal support.⁸ Many authors agree that mentoring is important for the retention of new faculty, a critical issue in dental education, and is a means of professional develop-

ment that enhances career satisfaction among existing faculty.⁹

Much has been written about the characteristics of an effective mentor. Fawcett reports that effective mentors possess patience, enthusiasm, knowledge, and a sense of humor and exhibit respect for others. Mentors should also serve as an advocate for the protégé and get to know him or her, thus allowing the protégé to succeed and the mentor-learner relationship to grow.¹⁰ It is obviously critically important for the mentoring pair to have compatible personalities and common professional interests.¹¹ The three Cs of the successful mentor (Competence, Confidence, Committed) as described by Morton-Cooper and Palmer¹² appear in Table 2.

Learning: The Mentor Provides Access to Learning and Potential

Effective mentors provide a distinct vision and guide their protégés to achieve the goals associated with these visions. Shepard et al. report that resources, strategies, and formal mentoring provide direction and guidance in the areas of teaching, promotion, and tenure for new educators and should be

Table 1. Characteristics of successful protégés

Standing out in the crowd:

- achieving high visibility
- having a positive attitude to work/career
- willing to take risks

Demonstrating the potential to succeed:

- willingness to learn and assist the mentor
- having initiative and being motivated
- ambitious and conscientious
- receptive to coaching and instruction

Adult intimacy capabilities:

- having positive self-esteem
- able to make a personal contribution
- loyal to individuals and the organization
- enlightened and enthusiastic
- making oneself accessible

Demonstrating leadership potential:

- sound judgment and creativity
- adaptability
- flexibility

Source: Morton-Cooper A, Palmer A. Mentoring in practice. In: Morton-Cooper A, Palmer A, eds. Mentoring, preceptorship, and clinical supervision. Oxford: Blackwell Science, 2000:59-62.

Table 2. Characteristics of successful mentors

The mentor has competence:

- appropriate knowledge and experience to be effective within the organization
- ability to command respect from others
- build on the protégé's strengths and offer constructive feedback on his or her limitations
- skills associated with interpersonal relations, communication, counseling, instructing, and coaching
- provides reliable information and resources
- promotes good judgment

The mentor has confidence:

- shares a network of valuable personal contacts
- is imaginative and creative
- demonstrates initiative, takes risks, and uses influence and charisma appropriately
- allows protégé to develop within his or her own terms
- seeks new challenges and initiatives
- is successful at what he or she does, providing status and prestige
- leads and offers clear direction
- shares credit for achievements
- is able to deal with others

The mentor is committed:

- provides faculty and staff development
- people-oriented and interested in seeing others develop and advance
- invests time, energy, and effort toward a different type of working relationship
- shares personal experience, knowledge, and skills
- desires to motivate others

Source: Morton-Cooper A, Palmer A. Mentoring in practice. In: Morton-Cooper A, Palmer A, eds. Mentoring, preceptorship, and clinical supervision. Oxford: Blackwell Science, 2000:59-62.

implemented in our dental schools.⁹ Schenkein and Best conclude that mentoring activities and the creation of opportunities for career development are crucial factors in developing interest in academics among graduate dentists.¹³ Most would agree that every faculty member should have credible advice when developing his or her teaching, research, and service portfolios.

Many articles on effective mentoring have been written in journals of academic medicine and nursing. Jackson et al. report that mentoring relationships are key to developing productive careers in academic medicine; however, such alliances hold a certain "mystery."⁸ This reinforces the idea that having a mentor-protégé pair that works well together and complements one another is critical for success of both individuals. Others confirm that if the "fit" is right, the protégé will experience the many positive outcomes of mentoring.⁴

Many authors' experiences in dental education indicate that junior faculty in dental education would welcome the guidance of an accomplished mentor as the benefits to this may be innumerable. Glickman et al. suggest that the junior faculty protégé adopts academic values, obtains practical advice, learns how to network, and ultimately grows both profession-

ally and individually from an effective mentor.¹¹ Others discuss this as a cultivation of the mentor/protégé relationship. At this time, a closer working status may exist that allows for daily contact between the mentoring dyad, bestowing special status on the protégé by association with the senior mentor and access to an inner circle. The work of the protégé may take on special significance that enhances the career of both protégé and mentor, and as the relationship develops, the mentor may cultivate the protégé's leadership and abilities through example, opportunities for practice, or direction.¹⁴ Through the advocacy of the mentor and demonstrated competence of the protégé, the protégé may begin to exhibit more energy and confidence in his or her academic pursuits. Stone contends that the additional encouragement and instruction that protégés receive from their mentors can motivate them to work harder, to take on challenging assignments, and to operate outside their boxes, resulting in increased productivity.⁷ A study conducted in an academic medical center by Benson et al. concluded that mentoring programs have a positive impact on junior and senior faculty satisfaction, reinvigorate the collegial structure, and improve productivity and retention even during a time of reorganization and minimal

resources.¹⁵ A recent study conducted by Moraini et al. suggests that formal mentoring programs have an overall positive impact on junior faculty and professional academic skill development, with greatest improvements in the understanding of academic values. The benefit to protégés included improved preparation to mentor others and increased perceptions of a supportive academic environment.¹⁶

At this time in history, when dental education institutions face faculty shortages, budget limitations, and curricular and student issues, mentors are vitally important. Individuals in dental education who are dedicated to the ideals of mentoring spend a great deal of time on the development of the protégés, which is beneficial to the protégé and the mentor, as well as the institution. The need to educate the protégé that academic pursuits, especially research, are not 9-5 activities, is a basic duty of the mentor and should not be taken lightly.¹⁷ As the mentoring dyad moves forward, the protégé will gain an understanding of the workload and productivity needed to succeed in an academic career, and the mentor will begin to solicit assistance and consultation from the protégé that will be useful for completion of his or her own projects. Mentoring of individuals who gravitate toward scholarship and research, along with the development of strategies to minimize barriers that work against academic careers, is essential to ensure that sufficient faculty are available in dental schools.¹³ The literature suggests that effective mentorship, while at times a cumbersome task, has a positive outcome for all involved. Highly intertwined are the growth of the protégé towards independence and the satisfaction of the mentor in the protégé's accomplishments.¹⁸

Legacy: Giving Back to Dental Education and Research

Most successful dental educators cannot discuss mentoring and legacy without mention of their own mentors. Although the term "mentoring" may not have been used often during the development of many prominent dental educators/researchers, their advisors typically instilled in them the importance of making academics and research an essential element to teaching and clinical practice.¹⁹ Many successful academic institutions encourage and support

mentoring relationships and have found ways to institutionalize the process. As the mentoring relationship grows from a directive interaction toward collaboration, transmission of the professional legacy to posterity occurs by empowerment of the protégé.²⁰ The mentor will hopefully possess a desire to pass on the torch to a new generation.¹⁴

Mentoring is a lifelong process. Each of us has the potential to mentor another individual and to promote the role model of mentor to our colleagues. Mentoring can be a powerful institutional strategy for personalizing individual faculty development. Most importantly, mentoring is a philosophy about people and how critical they are to an organization.¹⁴

People consistently influence our lives in a variety of ways. If one thinks back, there are most likely individuals who mentored us in ways that we were not aware of at that time in our lives. Some say that mentoring maintains a tradition: a knowledge or information process whereby the mentor provides a base for the protégé, passing on or handing down the tradition of inquiry, and sharing how to acquire critical information.¹⁴ Others believe that the delicate thread that has linked the protégé to the mentor is hard to break: what starts as an academic relationship gradually evolves into a friendship based on mutual respect, appreciation, and recognition.¹⁷

The power of mentors may not lie in a particular model they provide the protégé, but rather in their capacity to wake them up to important lessons.³ The mentor provides a safe, secure culture in which protégés can develop ideas/innovations, ensuring they receive the recognition that their efforts deserve.⁷ Additionally, an effective mentor takes pride in the growth and accomplishments of the protégé, garners respect from others as a result of working with them, and will bask in the accomplishments along with the protégé.⁵

There is enormous value in having the guidance of an intelligent, dedicated, encouraging, and genuine mentor. The literature confirms that effective mentoring is critical for success. Participants in mentoring programs develop a sense of personal transformation and empowerment.²¹ Publication of this article is a personal manifestation of the legacy to go beyond one's limits that has been cultivated by my mentor. In an indirect way, through his protégé, my mentor has given something back to the next generation of dental education and research. There is no greater satisfaction and reflected glory than what is experienced through the academic achievements of one's protégé.¹⁷

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REFERENCES

1. Lunding FJ, Clements GE, Perkins DS. Everyone who makes it has a mentor. *Harvard Business Review* 1978; 89-100.
2. International Executive's Profile. A decade of change in corporate leadership. New York: Korn/Ferry International and UCLA Anderson Graduate School of Management, 1990.
3. Goldsmith M, Kaye B, Shelton K, Tice L. Mentoring for untapped potential. In: Goldsmith M, Kaye B, Shelton K, eds. *Learning journeys*. Palo Alto: Davies-Black Publishing, 2000:185-8.
4. Gordon PA. The road to success with a mentor. *J Vasc Nurs* 2000;18:30-3.
5. Wellington S. Find a mentor/be a mentor. In: Wellington S, ed. *Be your own mentor*. New York: Random House, 2001:160-77.
6. Murray M. What mentoring is and what it is not. In: Murray M, ed. *Beyond the myths and magic of mentoring*. San Francisco: Jossey-Bass, 2001:15.
7. Stone FM. What mentoring is all about, solving problems before they happen. In: Stone FM, ed. *Coaching, counseling and mentoring*. New York: AMACOM, 1999:161-85.
8. Jackson VA, Palepu A, Szalacha L, Caswell C, Carr PL, Inui T. Having the right chemistry: a qualitative study of mentoring in academic medicine. *Acad Med* 2003;78: 328-34.
9. Shepard KR, Nihill P, Botto RW, McCarthy MW. Factors influencing pursuit and satisfaction of academic dentistry careers: perceptions of new dental educators. *J Dent Educ* 2001;65:841-7.
10. Fawcett DL. Mentoring: what it is and how to make it work. *AORN J* 2002;75:950-4.
11. Glickman GN, Comer RW, Filler SJ, Fine JB. Case I: managing people—the case of the frustrated faculty member. *J Dent Educ* 2002;66:520-5.
12. Morton-Cooper A, Palmer A. Mentoring in practice. In: Morton-Cooper A, Palmer A, eds. *Mentoring, preceptorship, and clinical supervision*. Oxford: Blackwell Science, 2000:59-62.
13. Schenkein HA, Best AM. Factors considered by new faculty in their decision to choose careers in academic dentistry. *J Dent Educ* 2001;65:832-40.
14. Luna G, Cullen D. Ashe-Eric higher education report—empowering the faculty: mentoring redirected and renewed. Washington, DC: George Washington University Graduate School of Education and Human Development, 1995.
15. Benson CA, Morahan PS, Sachdeva AK, Richman RC. Effective faculty preceptorship and mentoring during reorganization of an academic medical center. *Med Teach* 2002;24:550-7.
16. Morainski JA, Diehr S, Bower DJ, Simpson DE. A descriptive, cross sectional study of formal mentoring for faculty. *Fam Med* 1996;28:434-8.
17. Clarkson BH. Mentoring: a personal perspective. *J Dent Educ* 1995;59:548-50.
18. Caliandro A. Arthur Caliandro. In: Cuomo MR, ed. *The person who changed my life: prominent Americans recall their mentors*. Secaucus, NJ: Carol Publishing Group, 1999:41.
19. Bibby BG. Education for research—the dental clinic. *J Dent Educ* 1961;75:140-7.
20. Healy CC, Welchert AJ. Mentoring relationships: a definition to advance research and practice. *Educ Res* 1990; 19:17-21.
21. Pololi LH, Knight SM, Dennis K, Frankel RM. Helping medical school faculty realize their dreams: an innovative, collaborative mentoring program. *Acad Med* 2002; 77:377-84.