
A Mentorship Program for Minority Students

We want to share with the readers of *Academic Medicine* our view that mentors are an essential part of medical students' education and to describe a mentorship program for minority students at our school.

It is widely acknowledged that students need mentors at all levels of their medical education. Students benefit immensely if faculty members, in their roles as experienced physicians, direct, support, and reaffirm them. Students usually interact with their instructors only in the lecture hall, in the laboratory, or at the bedside, and thus get only brief glimpses into their expertise, interests, and activities. But as mentors, the instructors assume other important functions: teachers, role models, advisers, counselors, advocates, confidantes, and friends. Mentors and their students often form personal and long-term relationships, the kind in which the student is exposed to the physician's personal as well as professional life. A good mentor makes the student's medical school experience more rewarding, assists the student in personal and career development, and fosters professional socialization.

All students need mentors, although the need is probably greater for minority students because they have fewer role models. With this need in mind, in 1989, Wright State University School of Medicine, a community-based medical school in Dayton, Ohio, developed a mentorship program for African-American students, who constitute 17% of the school's enrollment. At present, the volunteer mentors are 26 African-American physicians, mostly in private practice and members of a local professional association (the Gem City Medical, Dental, and Pharmaceutical Society); some also are members of the school's voluntary faculty. In the first year of the program, the mentors were assigned to any student at any educational level who desired a mentor; now, the assignments are made to entering students only, with the understanding that they and their mentors may continue as long as they both wish to. Information describing the mentors and their

medical practices is given to students, who are assigned, whenever possible, the mentors they choose. This system works well; students rarely switch to a new mentor.

So far, 43 students have voluntarily participated in the mentorship program. Of these, 11 have graduated: four (who participated for a two-year period) in 1991 and seven (who participated for a three-year period) in 1992.

Students usually meet with their mentors at least once a month, usually in the hospital, at functions and organizational meetings, or in the physicians' offices. One student said that "it is important to be able to discuss future plans and current issues with someone not directly affiliated with the university setting." Unlike full-time faculty, the mentors usually do not evaluate the students' performances, nor do they have vested interests in the educational program. The students greatly appreciate their mentors, believe that they have enriched their medical education, and approve of the school's efforts in organizing the program.

Surprisingly, students have indicated that obtaining career and residency advice from their mentors is of secondary importance. Students value their mentors because they help the students avoid obstacles of many kinds, provide academic support, give insight into clinical rotations, promote understanding of the nature of a private practice, demonstrate how physicians balance their professional and personal lives, and enhance the medical school experience in general. Perhaps most important, the mentorship program helps students become a part of the community's private practice milieu.

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