Mentored Research Projects: Getting the most out of your mentors & overcoming common challenges

Chinazo Cunningham, MD, MS
FIT Conference
May 2017

We encourage you to use these slides when teaching. If you do, please cite this source and note any changes made.
- The Immersion Training in Addiction Medicine Program
Basic assumptions about mentoring

- Mentors can have different functions
- Mentoring content varies
- Mentoring matters

MENTORING IS ONE OF THE MOST IMPORTANT PREDICTORS OF SUCCESS
Mentoring Challenges: Real Life Examples

My journey
Mentorship of ID Fellow
Mentorship of new ID Faculty
Example 1: My journey
My journey

IM Residency
My journey

1996
IM Residency

1998
Chief Residency

2000

2006

2008
My journey

IM Residency

Chief Residency

My journey

1996
IM Residency

1998
Chief Residency

2000
Clinician-Educator Faculty Einstein

2006

2008
My journey

1996
IM Residency

1998
Chief Residency

2000
Clinician-Educator Faculty Einstein

2006

2008
My journey

1996
IM Residency

1998
Chief Residency

2000
Clinician-Educator Faculty Einstein

2006
Transition to Clinician-Investigator

2008
My journey

IM Residency

1996

Chief Residency

1998

No DGIM, Search for mentorship

2000

Transition to Clinician-Investigator

Clinician-Educator Faculty Einstein

2006

2008
Search for mentorship

• Searched for “the one”
  – Work-life balance, general internist, program development, CBO collaboration, HIV, homelessness, drug use

• Knocked on many doors

• Didn’t know what I wanted

• Put together a team (without knowing it)
  – Grant writer/program developer (MPH)
  – Statistical support (epidemiologist)
  – Career mentor (pediatrician)
  – Research mentor (family medicine)
My journey

1996
IM Residency

1998
Chief Residency

2000
Clinician-Educator Faculty Einstein

No DGIM, Search for mentorship

Transition to Clinician-Investigator

2006

Wrote grants, conducted studies, wrote manuscripts

2008
My journey

1996
- IM Residency

1998
- Chief Residency

2000
- Transition to Clinician-Investigator

- No DGIM, Search for mentorship

2006
- Career Dev Award, Master’s Degree

- Wrote grants, conducted studies, wrote manuscripts

Clinician-Educator Faculty Einstein
My journey

1996
- IM Residency

1998
- Chief Residency

2000
- No DGIM, Search for mentorship
- Transition to Clinician-Investigator

2006
- Wrote grants, conducted studies, wrote manuscripts
- Career Dev Award, Master’s Degree
- Recognition that mentorship lacking

2008
- Clinician-Educator Faculty Einstein
Recognition that mentorship was lacking

- Co-Investigator/Mentor on 3 grants
  - Had little/no participation in grant activities
- Late/cancelled meetings
- Received little substantive review of manuscripts
  - “Good job”
- Overall lack of investment
  - “Stepchild”
  - No master plan
My journey

1996
IM Residency

1998
Chief Residency

2000
Clinician-Educator Faculty Einstein

Wrote grants, conducted studies, wrote manuscripts

Transition to Clinician-Investigator

Recognition that mentorship lacking

Career Dev Award, Master’s Degree

2006
No DGIM, Search for mentorship

DGIM established, changed mentorship

2008
My journey

IM Residency

Chief Residency

1996

Clinician-Educator Faculty Einstein

1998

Wrote grants, conducted studies, wrote manuscripts

2000

Recognition that mentorship lacking

2006

DGIM established, changed mentorship

2008

Grants, research, manuscripts, mentor
Example 2: Mentorship of ID Fellow

- Uri Felsen, MD, MPH, MS
- Worked along side during his Residency & Chief Residency
- ID Fellow at our institution
  - Year 1: clinical
  - Years 2-3: Master’s degree, research project
- Approaches me during Year 3 of fellowship to inquire about mentorship
Mentorship of ID Fellow

• Interested in HIV testing in EDs
• Worked with ID mentor to develop HIV testing program
• Using HIV testing program to conduct research
• Several issues:
  – ID mentor considered self researcher, but participated in research projects that were others’ projects
  – Had many methodological questions
  – Needed help writing up findings
  – Wanted to join DGIM research group
  – Needed mentor for K23 grant application
Mentorship of ID Fellow: Challenges

• How to get the best out of both divisions?
• Roles of mentors?
• How to handle the sort-of-completed project?
  – Effort needed to write up findings
  – Authorship
• Differences in advice about career guidance
• Home to the K23 grant application
Mentorship of ID Fellow: Successes

- 3 manuscripts published, 1 under review
- K23 funded
- Individual and team mentor meetings
Example 3: Mentorship of new ID Faculty

- Brianna Norton, DO, MS
- New faculty hired after Duke ID fellowship
- Fellowship:
  - Projects focused on HIV, HCV and drug use
  - Published 3-4 papers
- Faculty:
  - In DGIM, same clinic, interested in similar population
  - Start HCV treatment in primary care clinic
  - Write K23
Mentorship of new ID Faculty

- ID physician working in primary care setting
- Research - Improving HCV treatment access and outcomes among drug-users in primary care
- Several issues:
  - HCV mentor with research experience, but in specialty setting
  - I had developed programs for HIV and buprenorphine treatment in primary care setting
  - Needed help writing K23 grant application
Mentorship of new ID Faculty: Challenges

• HCV mentor
  • Opportunities for HCV scholarship (talks, chapters)
  • Support for HCV activities
  • Networking with HCV experts
  • HCV expertise
  • High expectations for number/timeline of papers and grants
  • Needed more help with writing papers and grants

• Me as mentor
  • Understood project in terms of primary care setting
  • Disagreement with direction of project/grant
  • Writing
  • Work-life balance
Mentorship of new ID Faculty: Resolution

- COMMUNICATION
- Acceptance/Agreement of roles
- Needs of mentee as priority, matched with skills and expertise of mentors

- K23 = unscored to funded
Common mentoring challenges

- Level of investment and participation
  - Meetings
  - Reviewing work
- Team mentorship
  - COMMUNICATION
  - Roles of mentors
  - Authorship
  - Differences in opinions regarding career development
- “Ownership” of mentee’s project
The Mentoring Team

- **Career Mentor**  
  - Responsible for overall career guidance and support for mentee.

- **Research Mentor**  
  - Responsible for developing the creative and/or independent research careers of mentees.

- **Co-Mentor**  
  - Works with the mentee and research mentor to provide specialized content area or methodological expertise.

- **Peer (Near-Peer) Mentor**  
  - At or near same level as mentee, works alongside to also help guide scholarship
Functions of Mentors

• Sponsorship
• Coaching
• Protecting
• Challenging
• Providing exposure and visibility
• Goal setting
• Guiding

• Listening
• Help with decision-making
• Providing feedback
• Role Modeling
• Counseling
• Accepting/Confirming
• Friend
Mentoring content

- Career goals
- Clinical skills
- Conducting research
- Confidence building
- CV development
- Organization and committee participation

- Negotiating
- Professional networking
- Promotion/tenure
- Publishing
- Grant writing
What Makes a Mentor Effective?

• **Competence**
  – Professional knowledge and experience
  – Respect
  – Interpersonal skills and good judgment

• **Confidence**
  – Shares network of contacts and resources
  – Allows protégé to develop his/her own terms
  – Demonstrates initiative, takes risks
  – Shares credit

• **Commitment**
  – Invests time, energy and effort to mentoring
  – Shares personal experience
How to Choose a Mentor

Recall your most recent mentoring relationship…

• How did you identify and choose your mentor?
• What qualities were you searching for?

• If you had to do it again, would you have a similar or different strategy to identify/choose your mentor?
How to Choose a Mentor

• Consider the following qualities:
  – Interested in developing your career
  – Commitment to mentoring
  – Match your emotional needs
  – Match your professional needs (writing, methods, networking, etc.)
  – Research/scholarly interests
  – A successful track record
  – Good communication skills
  – Will provide networking opportunities
  – Is institutionally savvy
  – Expresses interest in you as a person
  – There is potential for reciprocity
How do you get the most out of your mentor?

Be a PROACTIVE mentee
Being a Proactive Mentee

• Many successful mentoring partnerships occur when:
  – Mentees take initiative and drive the partnership.
  – Mentees determine the pace, route, and destination.
  – Mentors can then offers insights and counsel that is focused on mentees’ objectives.
Mentee Strategies to Achieve Objectives

Mentors can best help mentees achieve their objectives when mentees clearly define where they want to go and how they want to get there.

• Specificity
• Measurability
• Work Plan
• Reality Check
• The Mentor’s Role
Mentee Do’s and Don’ts

**DO**
- Take initiative
- Be respectful of mentor’s time
- Communicate agenda and goals prior to meeting
- Practice self reflection
- Clarify your values
- Clarify goals and expectations
- Have multiple mentors
- Look for opportunities to teach your mentor
- Keep your CV, IDP up to date

**DON’T**
- Be passive—don’t wait for the mentor to initiate interactions
- Be late, disorganized
- Stay in the comfort zone
- Stay in a mentoring relationship when it’s not helpful
Unique mentoring issues for women & minorities

• Challenges
  – Less likely to be promoted
  – Less likely to obtain NIH funding
  – Few in leadership/mentorship positions are women or minorities

• Mentoring is even more critical

• Unique issues
References and Resources


• Zerzan T, et al. Making the most of mentors: A guide or mentees. Acad Med 2009;84:140-44