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Spark Podcast

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Interviewer: Dr. Teresa Chan
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Ruth Chen (00:02):

Welcome to the MacPFD Sparkle Podcast. This is Ruth Chen, and in the Sparkle subseries, we'll bring you shorter segments, released in between our longer Spark episodes.

We'll have new and exciting interviews with professionals from across the world, helping you to achieve your personal and professional goals as a healthcare educator, researcher, leader, or practitioner at any stage of your career. So sit back, listen, and enjoy this episode of the MacPFD sparkle podcast.

Today, Teresa Chan speaks with Dr. Vivian Lewis about her experiences directing a mentorship group at Rochester University. Dr. Lewis reflects on what it means to be someone's mentor, and the benefits of guiding early career faculty and students.

Dr. Teresa Chan (00:57):

Okay. Hello, everyone. This is Teresa Chan, and I'm here with a new guest, and she's from afar, but not that far, Rochester, actually.

Dr. Vivian Lewis is here with me, and she has been recommended to me by some of the other guests on the show as someone we got to talk to. And so Vivian, welcome to the show. Can you tell us a little bit about yourself?

Dr. Vivian Lewis (01:15):

Thank you, I am thrilled to be here today. This is quite an honor. I am on the faculty at the University of Rochester Medical School, in the Department of OB/GYN.

My main role now is with our Clinical Translational Science Institute, where I direct the Mentor Development Working Group, which is a group that oversees mentoring for a graduate student program, with trainees, medical students and some early career faculty. So that is the main thing that I'm doing now.

Over the years, I've had a variety of roles, principally at the University of Rochester, both clinical and administrative, and all of those things have gotten me to a place where I've become very interested in mentoring.

Dr. Teresa Chan (02:03):

All right, great. Tell me a little bit about what mentorship means to you. There's so many definitions out there, but what does it mean to be someone's mentor, in your opinion?

Dr. Vivian Lewis (02:13):

I think that in my opinion, mentoring means, somebody who helps you learn. They can help you learn, either through personal domains, psychosocial domains, career development domains, or content, the nuts and bolts of your discipline, and what you have to master in order to be a competent physician, educator, researcher, administrator.

When you think about it, all of those domains matter throughout this entire professional life, they usually are supported through more than just one person. And through more than one sort of title, not just the official mentor, but also, it can be your friend, your advisor, your sponsor, all of those things come to mind, when most people think about mentoring.

Dr. Teresa Chan (03:01):

Yeah, and I mean, I think there's obviously, when you hit the nerdy kind of books and literature out there, there's probably different definitions. That's why I wanted to understand a little bit better what you define it as, because some people would say that sponsorship is actually unique, that teaching is actually unique.

I mean, I'm more of a pragmatist. I think that when you're mentoring someone, you might hold different roles at once, so that's the reality of things. But yeah, just, that's cool. That's what you think.

Let's say you were going to mentor me. What are some of the basics that you would do, when you get started with someone? What are some things that you could do?

Dr. Vivian Lewis (03:34):

I too am a pragmatist, and I always kind of open up by asking people, and I do a lot of mentor education, and I always open up with that same sort of question. What does it mean to you to be a mentor?

Because that, of course, helps me identify what they're interested in talking about at the time. But I think that, for me, if I'm starting out mentoring someone, I want to know a lot about their motivation, because I think that that's really a key driver for mentee engagement and persistence, satisfaction.

How happy are they going to be with our mentoring relationship? What are they going to accomplish? And by accomplish, it's not so much what I want them to accomplish, it's what they want to accomplish. They have to identify those goals for it to have meaning, and really for them to do an excellent job.

Dr. Teresa Chan (04:25):

I really think that's a really key point. So really centering the mentorship relationship around the mentee. And I mean, I think about myself, some analogies I've heard of, that I think are effective, are the idea of being a mirror, being someone who can reflect back at someone else, that you're there to listen, and then, process it, and then reframe it in a different way for them.

Maybe a better after example would be mirror with a filter on it. Maybe it's like the Zoom, when you put the filter, that makes you look, with less wrinkles and stuff. I'm going to put an Instagram filter in there, you know.? [crosstalk 00:04:59].

Exactly. It's the idea of being able to show them a different version of maybe what they're seeing, so that they can reprocess the information, because sometimes we get stuck in our ruts.

And we see ourselves, and we get down on ourselves disproportionately, we have imposter syndrome. Or maybe we're getting ahead of ourselves, and getting a little too pompous, a little too arrogant. The mentor gives those outside insights, to be able to help us really get a sense of where we actually are.

Dr. Vivian Lewis (05:26):

Yes. And I think that really good mentors do a great idea of helping people understand their own motivation, through that lens that is both realistic, but also aspirational.

What does my best self look like? Maybe this is what I look like now, right now, with all my wrinkles and acne, but what does my best self look like? And how can I achieve that best self, and get in touch with that best self?

So I think that helping people understand their motivation, I think a lot about a specific motivational meta theory called self-determination theory. That is just a way to help me organize my thoughts around helping people think about their motivation.

So it does include, certainly, those goals. It includes those goals, and what we would call autonomously chosen goals. It includes establishing a relationship. I think that everybody who talks about mentoring, nerdy, pragmatic, or otherwise, recognizes that that relationship is really at the core of excellent mentoring.

And it includes competence, being able to be effective at what you're doing, and helping the person do that. So you talk about imposter syndrome, getting down on yourself unnecessarily, but also, you what is an optimal level of challenge that you can help this person see, such that they will realize their achievements, feel good about them, and keep going.

Dr. Teresa Chan (07:04):

All right. That's great. So tell me a little bit more now about how we can actually, in the moment, how do you make those decisions about where you want to go with a mentee?

So you've done the prep work, you've got that frame of mind, that you're like, that mentor mindset, I think, is what you've been describing.

What's your rationale for doing it, why you're doing it, how you're going to do it, centering it on the trainee. Those are all great tips for that mental preparation you have going in, but the mechanics, now.

You're in a session, you're staring awkwardly across the table, in the post-pandemic era or you're staring through a Zoom in the pandemic era, and you need to do something. How do you even make that start? Who makes the first move?

Dr. Vivian Lewis (07:44):

I think that depends on the context, but who makes the first move? You're the mentor, you're in the driver's seat. I think you want to start by checking in, by listening to the person.

What is top of mind for them? What are their main concerns? When you talk about mentee-centered mentoring. So yes, you want to know what is top of mind for them.

And you want to be sure that you touch base on all of the important elements, and make sure that you accomplish what it is you wanted to accomplish during that conversation, so that they don't just leave feeling, "Okay, I dumped on my mentor for an hour, we got something done," or, "It was just a gripe session."

You want to leave the conversation with some goals that you agree on. As the mentor, you have to constantly, not constantly, but periodically, perhaps, reframe the conversation, bring it back to the goals of what we were going to get done today, leave the mentee with some work to do.

Have them keep a reflective, maybe journal, or some kind of way to document where they are, so you have some big picture goals that you've chosen. We like to use an independent development plan or research plan for everybody, all our mentees, where they actually write their goals.

I know a lot of people have had those upended over 2020. Those are completely, or perhaps, let's say, those are work in progress for most people, and they should be. But to have those big picture goals, so you can constantly go back, or not constantly, periodically go back, and look and measure your progress, so you can see how you are doing.

You want to maybe think about whether those goals are still relevant, and you want to make sure that the mentee is doing okay. More in a well-being sense, certainly in the pandemic era, how are you managing day to day?

Because many people working remotely or working face to face, they have new stresses. This is a new era. This is unfamiliar to all of us.

So how are you managing your workload? How do you feel, in terms of your colleagues and your patients, how are they coping, and what effect is that having on you?

And do you think that you and I, mentor and mentee, connect enough? And is there something that you would want to change about our relationship?

Those are the high points. And they fit within that self-determination theory framework of competence, autonomy and relatedness, those basic needs, that I think always need to be satisfied in any mentor-mentee relationship.

So I always try to think about those in every session, even if it's just as a placeholder. "We're going to get back to this next time. Maybe there's something we haven't talked about, I want you to think about it." So yes, that was kind of how I frame my approach.

Dr. Teresa Chan (10:44):

Yeah, I really like that. The SDT is something that I have used in various forms, especially around this mentorship part, especially of junior faculty. That is something that I think it does really resonate with that target group.

It reminds us that we have to give people a chance to define their careers, because it's their careers, and as mentors, we can't override it. Whether it's junior faculty or senior residents, or a PhD student or a post-doc, I think it's 100%, that transition into their best selves, that we're trying to optimize.

I really like that phrase. It brings out the best, to think in all of us, how we can then potentiate someone else's best.

Dr. Vivian Lewis (11:24):

I think, as new faculty starting out, oftentimes, they can feel overwhelmed by the choices that are available to them, and choices, then not choices. Oftentimes, there are a lot of assignments that they have to fulfill.

They can get so caught up in doing all of those things, they lose sight of, why did they choose this field in the first place? Checking in with a mentor can help them think about that. It can help them keep going. It can prevent burnout, ultimately, and it helps them feel that somebody cares.

They're not just there to accomplish, just the chairman's mandated, "These many clinics have to be followed, and this many students have to be taught." So that's great. But also, I care about you and your well-being, and what is it wanted to get done.

And how satisfying is that to you? Because you're not going to stick with an academic career, unless you feel like some of your needs are being met too, not just the needs of your institution, or your department

Dr. Teresa Chan (12:28):

That hits at home. Because I think that a lot of the time, they talk about academia. The institution, the organization's always going to take more, and it's always going to want more, you can never do enough. And that can be a recipe for burnout.

So having a mentor that can flag this, that you need to do this for you, that you need to have a filter to empower you to see that, especially when you're more junior, and even when you're more in mid-career, or even when you're senior, right?

Having someone that can reflect back to [inaudible 00:12:54], but what's in it for you? Like, I've got your back, I'm in it to say, "You need to do this, because it has to be something that you want to do. If you're not interested in doing it, then so be it, and let's find something else for you to do. Or maybe this isn't a good fit altogether."

There are some people that exit academia, there are some people that come back into it. There's so many different ways to get involved with what it is that we do. I do think that it's a mentor's job to help someone see the opportunities for them to engage, or to know when they've engaged too much, and need to pull back a little bit.

Dr. Vivian Lewis (13:26):

Definitely. I think that, for me, one reason I went into academia is because there were so many choices. I didn't know.

I thought, "I want to do a little bit of research. I love taking care of patients. I'm also very interested in bigger societal needs, and that kind of social justice lens that medicine can create, great. But that's too much."

You have to, at times, pursue parts of that. Or you'll just be spinning your wheels.

Dr. Teresa Chan (13:57):

Yeah, and I think that generalizes across, not just medicine, there's nursing, rehabilitation sciences, research life, teaching life, right? There's always more and more.

The institution, whatever rule you've been hired to, I think of academia and the organization as something that has aspirational goals, but is almost a bottomless pit of work effort.

And we can all chip in, and it'll fill that whole a little bit transiently. But because of the way academia is set up, there's always more, right?

There's always more to do. There's always new ideas. There's always someone else coming up with fresh ideas and a new perspective, and then we've got new hires, and it's really exciting to be fostering to some of those people.

But it's still that bottomless pit, and we can never fill it. And that's the great privilege of working in academia, because there's always new ideas to chase, and new territory to explore, and be able to actually engage in these new ideas.

New innovations is one of the big thrills of being in academia. Yet there's always more papers to publish, there's always more papers to edit, always more students to teach, and supervise.

It's definitely a give and take, and trying to find that sweet spot. I think in the age of the pandemic, it's really reared its head as to how we can definitely, just feel the pressure, and then, not ever really be happy with the successes that we have.

Dr. Vivian Lewis (15:19):

I think that's really, really true. And I think that it also reminds us all that we need to have a life outside of medicine. As mentors, we need to recognize, certainly, in the context of the pandemic, that that life outside of medicine may have become a little more challenging in this time of pandemic era, and that reframing, "What is a realistic goal for you," is sometimes necessary.

The other thing that your comments make me think about is how you've spoken about, on some of your other podcasts, about the importance of having a group of mentors, not just one person. Maybe you have that mentor that helps you publish a specific paper, finish a protocol for teaching a particular skill, great.

But that doesn't mean that that person is in it to help you navigate the waters of promotion, or whether your career is it going in the right direction, writ large, or whether the dynamics on your team are necessarily optimal. I think that taking a little time for self-reflection is very important.

I know that many, many medical centers now, in this last year, have tried to adapt to the pandemic by creating resources, to promote wellness and mindfulness. And that so many of those resources have been helpful to faculty who just need to take a deep breath, in order to function. We're we're only human.

Dr. Teresa Chan (16:55):

So I'm going to pivot now. Because as two minority women, who have been through academia at this point, and healthcare academia, at that, are there any special considerations when you're mentoring women, men, people that are non-binary? Are there different considerations that you've noticed over the years, when you mentor one or the other, or both genders?

Dr. Vivian Lewis (17:15):

Yes. I'm so glad you brought that up, because really, as a minority woman, that is how I first became really specifically interested in this area of mentoring. I came up for promotion to full professor, and kind of had an "aha" moment about how many of my colleagues, the people who were like me, had not progressed to this level.

And it wasn't for lack of hard work, lack of knowledge, lack of skills, lack of commitment. It was perhaps that they didn't understand the ins and outs. They didn't have a mentor who cared about them, to help them get going with it.

And they were isolated in their area, or they wanted to pursue areas that the institution did not value as much. They wanted to take care of those really underserved patients, which took a little more time, and different skills. So they didn't appear to be as maybe productive.

I think that understanding those experiences got me thinking, "How can we do a better job of mentoring women, mentoring underrepresented minorities?" One thing is, the institution is losing out on a lot of talent that, just that plain and simple, people enter academia with high idealistic goals that they're going to change the system, and the system fails them.

The system ultimately is the loser, in my opinion, in that scenario. So in academic medicine, I think that, and I actually did a study with some colleagues in clinical psychology and self-determination theory, Richard Ryan, one of the founders of self-determination, helped me to put together a framework for mentoring, and teaching mentoring, the CARES Model, competence, Autonomy, Relatedness, E for Equity, and S for Structure.

All of the things that we just talked about, the relationship built on trust, the optimal challenge that helps scaffold a learner into greater and greater levels of accomplishment, and the volitional choices, all of those things are just as relevant for women and minorities. In fact, our research showed that mentors who were most attentive to the CARES system, those mentees were more satisfied, especially women. There were lower levels of burnout.

Equity? How many people do we know, that we feel, lots of studies, many, many studies, showing that women are not paid as much as men. That is so true in academic medicine, as it is in industry, and every walk of life. And that just has to change.

We're not going to keep giving 120%, and getting paid 80%. People leave, they get discouraged, they've had it, that's done definitely a demotivator. So finding ways to make the system equitable, as the mentor, making sure that your mentee feels that their efforts, even if it's not pay, are their efforts recognized equally, to those of their male colleagues, or their well-represented, from a racial, ethnic perspective, as their well-represented colleagues. So, fairness and equity.

Structure. How clear are the criteria, and are they selectively applied, those criteria for promotion? Or are they applied across the spectrum, no matter who you are? What kinds of feedback do we give people? That needs to be structured in.

I know so many underrepresented people who say, "No one told me they didn't think I was doing a good job." They just acted like everything's fine.

Meanwhile, the mentor, who may be acting more as a sponsor, unwittingly, for unconscious bias reasons, they're taking aside their white male colleague and saying, "You could really go far in this, if you would just do X, Y, Z." And they don't even think about taking aside the minority colleague, to give them the same of feedback, support, or sponsorship, that would help them move their careers along.

So the competence, autonomy, relatedness equity, and structure, all of those things, that acronym really, really plays out, I think, across the spectrum of especially underrepresented colleagues, but I think it resonates with everyone, but I think especially with underrepresented groups.

Starting with the relationship, that relationship has to be built on trust. Let's face it. If you feel like you're discriminated against, or you have that sense that you're just not quite being treated fairly, you're not necessarily going to trust the feedback that you get.

You may get overly defensive, and that sets up a bad dynamic. So as the mentor, you want to be extra attentive to the trust part of the relationship.

Dr. Teresa Chan (22:23):

Yeah, it certainly resonates with me as to, I think about some of my best mentors, and what that relationship is built upon. And trust is definitely at the cornerstone of that.

And I really like how in CARES, the R is in the middle, right? Because it's the fulcrum, it's the keystone put all over it.

Dr. Vivian Lewis (22:38):

Yeah.

Dr. Teresa Chan (22:39):

Without it, everything else just falls apart. If you think about that analogy, you think of almost like CARES, like a curved arch, with the R being kind of in the middle.

The arch can't pull if there's no Keystone, so ... All right. To be honest, this has been a fantastic conversation. And clearly, you're a wealth of knowledge in this area, and I'm so glad that we had a chance to connect.

Do you have any final thoughts on any hurdles for those people who have been in the mentorship game for a while, have been doing this for a while? What's something that you think that they should all bear in mind?

Because I think we've talked about when you're getting started, we've talked a little bit about the ongoing practice of it. But for those people who, they're like, "Should I keep mentoring? I'm not sure if this is for me anymore. I'm getting a little burnt out myself. I'm too busy, I've got a lot on my plate."

And they're trying to decide if mentorship is something that they should continue. How would you sell to them that this is something that they should pick up again, and dust off?

Dr. Vivian Lewis (23:33):

Oh, that's a great question. I don't often get asked that. So I think, yes, if you are a mentor who's been in the game for a long time, and you're just wondering, "Should I bother with this?" I think thinking about your own motivation is really important.

I think there are, certainly, the extrinsic motivators where you're doing it, because you were assigned by your chair or director, or whomever, and something you felt like you had to do, then letting it go is fine.

If you don't have to do it, don't do it. Or are you doing it, because it speaks to you, it speaks to your heart, it speaks to your values.

And how does it speak to your values? Are you someone who loves to educate, loves to see that next generation grow and thrive?

Do you feel like you have something to give as a mentor, and is that satisfying to you? Then those would be really good reasons to continue to do it, to pick it up and pursue it again.

Did you have an unsatisfying relationship as a mentor, or a few that turned you off? Maybe that's because your mentees weren't as engaged as they might be. And what kind of relationship did you have with them? Did you explore what was important to them, and tend to their needs as mentees?

I think we all need mentors, we all need more mentors. And I think that there's now there's so many tools to learn how to be an excellent mentor.

You have all those podcasts that you've done yourself, that are wonderful ways for people to think about, "Why is it I do this? Is this satisfying to me and, and how might it be satisfying to me? And should I pursue it again? Maybe it can be a little more selective about whom I mentor, and how I mentor them, so that it's satisfying for me, and also, the mentee gets something out of it." It has to be a win-win, or it's not worth it.

Dr. Teresa Chan (25:26):

That's a great final thought. I mean, I think the only addendum I would share is that maybe it's time to also seek a mentor yourself. Because I think that people forget, and they're mentoring the whole world.

Then they're like Atlas, with the whole world on their shoulders. And really, what you need at that point is, not that you need to stop mentoring, is that maybe you need support yourself.

Dr. Vivian Lewis (25:44):

Yeah.

Dr. Teresa Chan (25:44):

And maybe you need to think about how you can move this forward, and get the help that you need. Maybe it's about leaning on some of your apprentices, who have now maybe become associate profs themselves, or full pros themselves, and say, "Hey, I've got a lot of mentees, but I can't do it all," right?

How do you involve a community, and build that base around the people that we need to support, but some of those people are ourselves? Thinking about that, I think, is the only other thing I would possibly add. Thank you so much, and this has been a great conversation.

Dr. Vivian Lewis (26:14):

Great. It's been an honor and a lot of fun. So thank you, Teresa.

Dr. Teresa Chan (26:19):

Thank you so much.

Dr. Teresa Chan (26:22):

Thank you so much for tuning in to the MacPFD Spark Podcast. Just so you know, this podcast has been brought to you by the McMaster Faculty of Health Sciences and specifically the Office of Continuing Professional Development and the Program for Faculty Development. If you're interested in finding out more about what we can offer for faculty development check out our website at www.macpfd.ca that's www.M-A-C-P-F-D.ca. Many of our events are actually web events that are free. Finally, I'd like to thank our sound engineer Mr. Nick Hoskin who has been an amazing asset to our team, thanks so much Nick for all that you do. And also thank you to Scott Holmes for supplying us the music that you've been listening to. All right. So until next time this is MacPFD Spark signing off.