Short Report

Exploring models, practice and strategies in mentorship within health professions education in the Southern African context: Short report

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Background. Despite benefits, structured mentorship needs to be better recognised within health profession training institutions (HPI) in Southern Africa (SA). Given the need to transform faculties and retain skilled personnel, mentoring programmes can be used to address these needs and warrant further exploration.
Objective. To explore mentorship models within HPI in SA.
Methods. During the annual South African Health Educationalists Conference (SAAHE) in 2022, five academics from HPIs in the region conducted an interactive national workshop on mentorship in health professions education. Following a presentation on mentorship models, participants were allowed to share their perspectives on current mentorship practices, gaps and recommendations for enhancing mentorship. Key concepts and themes generated are reported.
Results. Three key approaches to mentorship models were identified during the workshop. These were 'top-down', 'ad-hoc' and 'supportive' approaches. Mentorship models were largely self-initiated and followed a traditional dyadic style with little innovation. Mandatory 'top-down', over-regulated programmes compared with 'grassroots' approaches were the two extremes reflected on the spectrum of models. While the benefits of mentorship were recognised, institution-wide implementation is lacking, reflecting varied or no widescale adoption. Mentorship could serve as a focused, formal strategy to ensure the demographic transformation of HPIs. Recommendations were made to measure the effectiveness of mentorship programmes against academic promotion criteria and research outputs.
Conclusion. While mentorship is positively viewed as a means to ensure improved equity and outputs, practical implementation is lacking. Mentorship programmes require further exploration of models and processes to facilitate successful implementation.
Keywords. Mentorship, health professions education, faculty development, sub-Saharan Africa.

Afr J Health Professions Educ 2024;16(4):e1563. https://doi.org/10.7196/AJHPE.2024.v16i4.1563

Mentoring is defined as 'a process where an experienced, highly regarded, empathetic person (the mentor) guides another (usually younger) individual (the mentee) in the development and re-examination of their ideas, learning, and personal and professional development' and contrasted with supervision and coaching.[1] Health professions education (HPE) in Southern Africa (SA) reflects unique challenges, including the need to rapidly transform the demographic profiles of faculty and student populations to reflect the society where we are mandated to train and serve.[2,3] Navigating academic promotion, career development and transformation in the field of Health professions education in SA has not been well described in the context of mentorship programmes.[4] Within this context, an online workshop was conducted to explore mentorship in African HPIs at the annual Southern African Health Educationalists (SAAHE) conference in June 2022. Using Lave and Wengers 'communities of practice' as a pedagogical framework that resonates with participants in the HPE network,[5] we reflect on mentorship models and perceptions of participants from various HPIs on their experiences of the current state of mentorship in their contexts.

Workshop process

A three-hour online workshop with self-selected participants was conducted on the SAAHE conference platform on 27 June 2022. The workshop structure included a review of mentorship definitions and a discussion of common mentoring models and their documented benefits, in line with the Sustainable Developmental Goals 3 (good health and well being) and 4 (Quality Education). Participants were then allowed to share their perspectives on current mentorship practices at their institutions and invited to share recommendations to enhance mentorship. Participants' perspectives on formalising mentorship at HEI in SA and its possible

influence on career development, academic promotion and transformation were also discussed. Following the workshop, each of the five author's individual reflections were analysed, key concepts were categorised and two team members extracted themes on which consensus had been reached. The other three team members then verified the themes and key observations during a process that included several iterations.

Workshop participants

Participants for the SAAHE workshop included a total of 17 HPE academics from nine different institutions, representing SA (*n*=7), Namibia (*n*=1), and Botswana (*n*=1). The participants occupied academic positions at lecturer level (*n*=6; 35.3%), Head of Department/Vice Dean (*n*=6; 35.3%) and other managerial levels at HPIs (*n*=5; 29.4%).

Workshop findings

Participants reflected on an array of heterogenous mentoring models as adopted in the various mentorship programmes. Within these, three key approaches were identified: 1) a top-down model, 2) an ad-hoc (laissez-faire) model and 3) a supportive (positive reward) model. In the SA context, the top-down model was described as a deliberate, purposive and often centrally supported and driven approach. This model was mostly implemented at the faculty level, forming an integral component of scholarship development. Concerns from participants included the perception that central control came with mandatory and regulated oversight that could be daunting and restrict innovation or individual preferences. The ad-hoc model was the most common mentoring approach and was regarded as the default position at most institutions. The main concern about the 'laissez-faire' approach was that it relegated mentorship to an 'add-on' function and potentially created inequity as only some members seemingly benefit from these informal arrangements. Participants also described an additional model that allowed a combination of approaches that ensured that mentorship within a faculty was actively rewarded. The mixed-reward approach could be seen through relationships that support the mentee's academic career development and access to resources (e.g., research grants, university resources and sabbatical leave).

We also noted that most mentor-mentee relationships generally conformed to the traditional one-on-one, dyadic format. Key observations furthermore indicated that most mentor-mentee relationships were self-initiated. Despite an overwhelming acknowledgement of the many educational benefits of mentoring in academia, we recorded a dearth of centrally initiated and centrally supported institutional mentorship programmes. Additionally, mentorship at HEIs was was neither activated nor well formalised. One of the most tangible rewards for the mentoring relationship manifested when supervisors as mentors assisted with scholarly outcomes related to postgraduate research projects that are valued in the academic promotion process. There is however still a lack of widescale adoption and implementation of mentorship to promote explicit demographic transformation across HPE institutions in SA.

Recommendations from the workshop

Participants at the workshop reiterated the importance of mentoring in academic contexts. They suggested that mentorship programmes be included as an essential component of HPE institutional strategies to develop and hone the skills and capabilities of faculty members. These programmes should be used to ensure institutional sustainability in improving faculty retention and personnel growth and development. Institutional buy-in must be made explicit with central support and encouragement for all faculty members to participate in mentorship programmes by actively identifying willing mentors. Training on and the delivery of mentoring could be included in faculty development, and a repository of resources on mentoring skills be developed in all institutions. A two-step framework was identified from inputs to support initiating and maintaining institution-wide mentorship programmes. Table 1 lists the essential components of this two-step framework to support the initiation and maintenance of mentee-mentor relationships.

Mentoring programmes at HEIs should have explicit goals aligned to demographic transformation, research innovation and career development. Mentorship programmes in SA should be included as major outputs for mentees' and mentors' academic promotion prospects to enable transformations within HPIs and access to resources to support research, innovation and sustainable development of the HPE professoriate.

Discussion

On reflection, while highly valued, mentorship lacks institution-wide, practical implementation in SA. This is noted as a missed opportunity while negotiating the context of high workloads in health professions. Despite reports of specific improvements in the quality of clinical care, data-driven decision-making, leadership and accountability, the lack of widespread uptake of formalised, centrally supported mentorship programmes in the various health professions, including clinical medicine, is of specific concern.[6] Most mentorship programmes remain 'largely informal', 'ad-hoc' and 'non-institutionalised'.[7,8] While the lack of institutional buy-in and strategic prioritisation has been noted across many parts of the world, the situation in SA requires urgent review.

While over-regulated, 'top-down' mandatory mentorship programmes were perceived as problematic, having an 'ad-hoc', 'laissez-faire' and 'grassroots' approach also does not seem feasible in SA. The reflection that the choice of models for mentorship should be left to faculty and HPIs finds resonance in studies that promote central administrative support for these

Table 1. Two-step framework for initiating and maintaining mentee-mentor relationships

Initiating phase
1. Ensure there is equitable access to possible mentors for all mentees.
2. Support innovative ideas to allow junior faculty access to a mentor.
3. Promote 'meet and greet' sessions within faculties to break down initial barriers.
4. Build a system to allow a choice of either mentors or mentees without repercussions.
5. Allow a suitable 'probation' period for the mentee and mentor to develop a relationship.
6. Facilitate the development of an honest relationship and allow an 'escape clause' without any repercussions in cases where the mentee and mentor relationship does not work well.
Maintaining phase
1. Institute regular reviews for mentors and mentees to evaluate their progress.
2. Provide clear guidelines, including timelines for meetings and reviews.
3. Have clear guidelines on boundaries for mentor-mentee relationships.
4. Encourage the mentor-mentee team to develop explicit and measurable outputs at the start of each academic performance cycle that could include a memorandum of understanding to reflect the agreement.

programmes and the need for pedagogical support to create lifelong learners and self-improvement.[9]

An additional identified need for mentorship programmes is that they must have tangible, measurable outcomes. In SA, the benefits of incorporating mentorship into HPI strategies require a pivot to measure outputs in terms of national needs and ensure sustainable HPIs.[5] The identified outputs include measuring faculty demographic transformation, research and innovation outputs. This can be evaluated with academic promotability and securing resources for mentors and mentees. By measuring these, we can assist with the need for a stronger evidence base associated with successful mentorship programmes.

Conclusion

While mentorship is positively viewed as a means to ensure improved equity and improved outputs, evidence of structured, intentional and practical implementation in most SA institutions is lacking. Mentorship programmes in SA require further exploration, specifically concerning the models and processes to be followed. Mentorship programmes have the potential to support demographic transformation and sustainable HEIs.

Declaration. This report summarises reflections from a conference workshop. All participants were informed of the reflective nature of the workshop and the report to follow that the five workshop coordinators planned as an outcome. Consent was requested before the workshop. Consent from the conference organisers was also solicited and participants were limited to those who consented.

Acknowledgements. The authors would like to thank all participants in the SAAHE 2022 workshop on mentoring in HPE for their involvement.

Author contributions. All authors participated in the workshop as co-facilitators. KLN created the first version of the report. KLN, LB, RM, SA and JvW edited, revised and contributed to all aspects of the report.

Funding. None.

Conflicts of interest. None.

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Received 24 September 2024. Accepted 5 June 2024.