CORRESPONDENCE

Near-peer mentorship compared with traditional mentorship in the University of British Columbia anesthesia residency program

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To the Editor,

Mentorship plays an essential role in professional development, academic and personal productivity, and career advancement.¹ Despite the importance of mentorship programs, they are underutilized in anesthesia, and when in place, barriers may interfere with their success.¹ Traditional “top down” dyadic mentoring models have been criticized because of inflexibility in matching mentors with mentees.¹ A potential alternative mentorship model is a “near-peer” program where junior residents are paired with more senior resident colleagues. This system may form a more productive relationship compared with the traditional mentorship structure, as near-peer mentors are more connected to the challenges faced by fellow trainees.^{2,3}

Previously, the University of British Columbia Anesthesiology Program used a traditional mentorship model, where incoming residents were paired with faculty mentors based on interests, practice setting, and career plans. Beginning July 2018, the program was modified to partner incoming residents with a second-year resident mentor, based on internship site and interests. We planned to match the residents to faculty mentors in their second year of training, after the survey was completed. To assess

the near-peer program, we surveyed residents who had participated in the traditional model (1 January to 28 February 2019) and the near-peer model (1 July to 31 August 2019, after their internship year).

Residents were provided with an anonymous web-based survey link with one reminder that assessed their comfort-level asking mentors for advice, ease of transition to residency, and overall satisfaction using a five-point Likert scale (Table). These domains were chosen to assess potential areas of improvement in our mentorship program. A response box was provided for narrative feedback. Responses were compared using a Wilcoxon–Mann–Whitney test. $P < 0.05$ was considered significant and data were analyzed using STATA 12.1 (StataCorp, TX, USA). As our survey was considered a quality improvement project, Research Ethics Board approval was not formally required.

Of 35 respondents, 25 and ten residents were from the traditional and near-peer mentorship programs, respectively. Eighteen (51%) respondents were male. The response rate of residents in the traditional program was 57% (25/44) and respondents were spread across training years. The response rate of residents in the near-peer mentorship program was 91% (10/11). According to our survey, residents in the near-peer program were more likely to agree that the mentorship program eased their transition to residency (Table) and comfort asking for academic, professional, and personal advice. The two groups had similar overall program satisfaction. The narrative feedback box yielded five responses from each cohort. Residents in the traditional program desired better personality matching, more staff engagement, and structured mentorship meetings. All responses from residents in the near-peer program expressed a desire for staff mentorship in addition to peer mentors.

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TABLE Mentee perception of traditional and near-peer mentorship programs

	Traditional mentorship (n=25)	Near-peer mentorship (n=10)
<i>I felt comfortable asking my mentor for academic advice</i>	<i>P</i> = 0.003	
Strongly agree	4 (16)	6 (60)
Agree	9 (36)	4 (40)
Neutral	7 (28)	0 (0)
Disagree	2 (8)	0 (0)
Strongly disagree	3 (12)	0 (0)
<i>I felt comfortable asking my mentor for professional advice</i>	<i>P</i> = 0.02	
Strongly agree	4 (16)	4 (40)
Agree	8 (32)	5 (50)
Neutral	8 (32)	1 (10)
Disagree	2 (8)	0 (0)
Strongly disagree	3 (12)	0 (0)
<i>I felt comfortable asking my mentor for personal advice</i>	<i>P</i> = 0.007	
Strongly agree	1 (4)	4 (40)
Agree	8 (32)	3 (30)
Neutral	6 (24)	3 (30)
Disagree	7 (28)	0 (0)
Strongly disagree	3 (12)	0 (0)
<i>My transition to residency was made easier by the mentorship program</i>	<i>P</i> = 0.008	
Strongly agree	0 (0)	2 (20)
Agree	4 (16)	4 (40)
Neutral	8 (32)	3 (30)
Disagree	7 (28)	0 (0)
Strongly disagree	6 (24)	1 (10)
<i>Overall, how satisfied are you with the current UBC Anesthesiology Mentorship Program?*</i>	<i>P</i> = 0.15	
5	0 (0)	1 (10)
4	9 (36)	4 (40)
3	7 (28)	4 (40)
2	7 (28)	1 (10)
1	2 (8)	0 (0)

All data presented as number (%) of respondents. *P* values were calculated using a Wilcoxon-Mann-Whitney test. *Satisfaction rated on a scale from 1 to 5, where 1 was “very unsatisfied” and 5 was “very satisfied”. UBC = University of British Columbia

Our survey shows that, compared with a traditional model, residents in the near-peer mentorship model were more likely to agree that the mentorship program improved their transition to residency, although we lack a robust definition of success. Narrative feedback indicated that near-peer mentees were also interested in faculty mentorship and were unaware of our intention to match them with a staff mentor in their second year. We have addressed this concern by introducing a mentorship orientation session for subsequent cohorts early in the academic year. Many responses from traditional mentees were neutral or negative, suggesting potential problems with the traditional dyadic faculty mentorship program. Our study has several limitations including the small

number of residents from a single centre and participation bias. Our findings may not apply to residents at other institutions or models of training. Overall, our new mentorship program structure may help address the dynamic needs of trainees at our institution; however, future research is required to discover the ideal mentorship model during anesthesia training.

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