

Love Letters: An Anthology of Constructive Relationship Advice Shared Between Junior Mentees and Their Mentors

SUZANNE M. GILLESPIE, MD, RD

LORALEI L. THORNBURG, MD

THOMAS V. CAPRIO, MD, MPH

ANNETTE MEDINA-WALPOLE, MD

Abstract

Mentorship is critical to the professional success of physicians, physicians-in-training, and junior faculty in academic practice. There are challenges to being a thoughtful and effective mentor and to being an engaged mentee. Many physicians and physicians-in-training cite difficulty finding professional time to dedicate to building their mentoring relationships, particularly given demanding clinical workloads and competing time commitments. Therefore, making the

most out of the time in mentoring relationships is key to success. We present a collection of frustrations and good advice that have been passed between mentees and mentors on improving the mentor-mentee relationship. The information was compiled from actual interactions between mentors and mentees, and these “love letters” draw on complex associations, which like any “committed” relationship require constant reevaluation and discussion to bring them to their full potential.

Author’s Note: The quotes and advice received represent actual advice received by the authors and those fellows, trainees, and junior and senior faculty members that they interviewed to create this article.

Dear Senior Faculty Mentors:

As junior faculty and trainees, we are grateful for your influence on our careers. We are honored that you have taken time from your busy lives and committed yourself to our development. These committed professional relationships have been invaluable to us. However, there are a few things that just aren’t working out in our relationships.¹

This is not a “Dear John” letter; we aren’t breaking up with you. But there are some things you have said and done that make us wonder if you really understand what we want and need from these relationships. We have spoken to

our peers, and many have shared similar growing pains in their academic mentorial relationships. Our collective experiences and observations are included in this letter. We hope it gives you and other mentors insight into the minds of junior mentees and helps you to better guide us through the wilds of academia and training.

1. On feedback: “It was great” is not feedback.

Generally, junior mentees are hungry for constructive, thoughtful advice on how to improve.¹ “Good job” and “great” do not constitute adequate feedback. They don’t even feel like genuine compliments. Rather, they feel like a way to get us “out of your office” or out of your “inbox.” We know we aren’t perfect, and although we crave your approval, we also need your critical eye and constructive feedback to improve. If you don’t have the time for an in-depth assessment of our efforts, try to offer a few thoughtful, focused comments. This will be far more helpful than any generic praise. If we send you our latest grant or manuscript and you don’t have time to read it all, rather than sending a “Great, looks good, thanks” reply, give us your thoughts about the pages you do have time to read or tell us when you would be able to provide meaningful feedback.

2. On commitment: “Are we meeting again already?”

It is important for us to spend time with our mentors.² Sometimes brief, frequent meetings are needed to keep us on track with a project. At other times, spending more time together is needed to

All authors are at the University of Rochester. **Suzanne M. Gillespie MD, RD**, is Assistant Professor of Medicine, Division of Geriatrics/Aging; **Loralei L. Thornburg, MD**, is Assistant Professor of Obstetrics and Gynecology, Division of Maternal and Fetal Medicine, Department of Obstetrics and Gynecology; **Thomas V. Caprio, MD, MPH**, is Assistant Professor of Medicine in the Division of Geriatrics/Aging; and **Annette Medina-Walpole, MD**, is Associate Professor of Medicine in the Division of Geriatrics/Aging.

Drs Gillespie and Caprio are recipients of Geriatric Academic Career Awards administered by the Bureau of Health Professions, Health Resources and Services Administration, US Department of Health and Human Services.

Corresponding author: Loralei Thornburg, MD, Department of Ob/Gyn, Box 668, University of Rochester, Strong Memorial Hospital, 601 Elmwood Avenue, Rochester, NY 14642, 585.275.7480, Loralei_thornburg@urmc.rochester.edu

DOI: <http://dx.doi.org/10.4300/JGME-D-11-00304.1>

generate thoughtful discussion. We are both busy professionals. Committing time to our relationship and honoring that commitment by welcoming, valuing, and protecting our meetings is important. Please do not answer phone calls or do other work during our meetings. Regular discussion about how much time we can each commit to our relationship will clarify expectations.

3. **On engagement:** “So, what have you been up to lately?” Engaged mentors are effective mentors. We would like you to know what we’re working on, and to remember when we have important deadlines looming. Your interest and participation make us feel supported in our work and help keep us on track. It makes you seem disinterested in us when we hear, “Oh, I am so sorry I missed your presentation, it must have fallen off my radar.”
4. **On balance:** “Don’t know how you do it all” and “Keep up the good work.” As developing professionals, we struggle to find balance in our professional and personal lives. Help us critically assess the things we are doing. Are we doing too much? Should we do less? “Keep up the good work” is too general to be of any use. In what area? In what way? In which area are we excelling? What should we be keeping up? We know that medicine, especially in academia, is a full-time job. We also know that we have to balance our work-life commitments or we will not be personally or professionally satisfied in either area. Be prepared for us to seek your specific advice about how best to do this.
5. **On self-awareness:** “You can do anything you want to” and “I always thought knowing what you wanted to do was part of being a grownup.” Junior mentees often need help finding their niche. We often lack the “10 000 foot” view of the entire picture. We may lack insight into our most valuable skills and areas for improvement. Help us to identify these, and please be specific. Insight into ourselves will help us better focus our work efforts and create long-term career success. As senior leaders, you can work with us to ensure that our efforts align with the strategic plans for our field, ourselves, and the department and academic centers.
6. **“I can help you with that”:** Mentors who know and share their strengths and weaknesses are worth their weight in gold. If analyzing data or editing manuscripts isn’t your thing, connect us with someone you know who has those skills. As our mentor, you can help us build a team of colleagues equipped with the goods to help us succeed.
7. **On advocacy:** “Just tell them you can’t do it” or “You should get onto that national committee.”

Please advocate for us.³ For trainees and many members of the faculty, “just say no” isn’t helpful advice when the “someone” involved is the dean or chair. Be willing to go to bat for us and explain why our time is needed elsewhere. Similarly, when opportunities arise for leadership in professional organizations, be our champion. Some mentors may worry that pushing their junior mentees into the limelight will expose them to recruitment by other centers. In contrast, when you showcase our talents and support our development as national leaders, we know that you believe in us and value our work. Why would we ever leave?

Dearest mentors, we close by reminding you how much we love you and look forward to countless years of exciting professional and educational development. Thanks for everything you do.

Love, Your Junior Mentees

Dear Junior Faculty and Trainee Mentees:

Thank you for your kind words of constructive feedback. We have tried to provide the foundation for your academic career and professional development. It has become increasingly apparent that there are domains in our relationship that need your attention too.⁴

1. **On feedback: “I don’t know, what do you think?”** We know what we think! We need to hear that you are being honest and reflectively analytical about your own work. Developing insight into your own work is an important part of academic and personal development. We are trying to help you develop it! We’ll share our constructive feedback, but we can’t think for you.
2. **On commitment: “Can you review this? It’s not due until tomorrow.”** It should come as no surprise that we are busy. Although mentoring is fulfilling and rewarding, we have our own deadlines to meet. We need time and notice so we can give your work the attention that it deserves.
3. **On engagement: “I thought you would do it” or “I thought you would tell me when I should do it.”** Academic medicine and learning are full-time jobs. The responsibility to ensure our mentoring relationship moves forward is yours. We cannot take sole responsibility for tracking you down, checking your progress, and pushing you forward.^{1,4} Be responsive to e-mails and/or requests within a reasonable time frame with at least a short reply that you are acknowledging and working toward a thoughtful response. You need to anticipate and schedule time on our calendar in advance so that it will be there when we need it.

4. **On balance: “I give up, I can’t do it anymore.”**
Think about the things that we do and how we prioritize them. It turns out that we, like you, cannot do everything. Every choice results in sacrifices in other areas of work and life. We’ll support you in your decision making, but only you can make an honest assessment of where your interests and abilities lie, and how strong your commitment is to goals. Think about these things before you reach the breaking point and please come to us for advice well before that time.
5. **On balance: “I can do it.”** As you point out, agreeing to do something doesn’t help if you can’t do it. Think first: Do you really want to do it? Are you able to do it? Are you agreeing as a favor to us, or because you think you just can’t say no? We would not ask you if we did not think it had value, but doing a poor job is worse than being honest about your interest and time commitments. Be honest about the time frame that you “can” do it when taking something on. If we decide to write a grant or paper or do a project together, tell us honestly if the deadlines are realistic with your other activities. Only when we have that information can we begin to advise you and advocate for your time.
6. **On self-awareness: Know your weaknesses: “I just don’t know what I want to do.”** A learning plan is an important component of any trainee’s development as well as any academic career, and we can help you develop it. It is this type of thoughtful reflection on your strengths and weaknesses that

will help you develop realistic career goals. Career development is an ongoing process; it requires patience and self-reflection. Rome wasn’t built in a day. Career development can’t be rushed, and it cannot be done without self-appraisal and goal setting. Be honest with yourself and us about your strengths, weaknesses, and future plans.¹

7. **On advocacy: Be your own champion: “I thought you knew I was interested.”** If you really want to be considered for something or put up for a position, you need to tell us. We will be honest about your qualifications and help assess your appropriateness for a position. We will also tell you if we think that it isn’t the right move to advance your career. At the same time, if you have done something great, we want and need to hear about it. It is appropriate to self-advocate and tell us of your success. We use those accomplishments to weigh your readiness for new opportunities. Remember, your success is our success, and we do have your best interests in mind at all times.

Forever Yours, Senior Faculty and Mentors

References

- 1** Straus S, Chatur F, Taylor M. Issues in the mentor–mentee relationship in academic medicine: a qualitative study. *Acad Med.* 2009;84(1):135–139.
- 2** Pololi L, Conrad P, Knight S, Carr P. A study of the relational aspects of the culture of academic medicine. *Acad Med.* 2009;84(1):106–114.
- 3** Ibarra H, Carter NM, Silva C. Why men still get more promotions than women. *Harv Bus Rev.* 2010;88(9):80–85.
- 4** Zerzan JT, Hess R, Schur E, Phillips RS, Rigotti N. Making the most of mentors: a guide for mentees. *Acad Med.* 2009;84(1):140–144.