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Educating, Training, and Mentoring Minority Faculty and Other Trainees in Mental Health Services Research

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Abstract

Objective—The authors describe the evolution of a novel national training program to develop minority faculty for mental health services research careers. Recruiting, training, and sustaining minority health professionals for academic research careers in mental health services research have proven challenging.

Method—Over the past 8 years the authors developed NIMH-funded programs to educate, train, and mentor minority psychiatrists and other junior faculty and graduate and post-graduate students. Their areas of academic interest focus primarily on minority mental health issues in primary care and community settings.

Results—The authors began with a program that targeted local trainees from the University of New Mexico and expanded to regional and national programs offering weeklong institutes, onsite and distance mentoring by experts, and supportive peer interactions that addressed the considerable challenges affecting trainee career decisions and paths.

Conclusions—Early outcomes support the value of these programs.

The challenges of recruiting, educating, training, mentoring, and sustaining the careers of minority group members in academic mental health-oriented research careers are substantial, and, as a result, few minority academic faculty enter or endure in these fields. Beyond the many obstacles facing young, academically oriented health professionals in general (1–3), minority faculty face the additional burdens of relatively few successful role models and mentors, often greater economic hardships than nonminority trainees in comparable positions, pressures to assume extra-administrative burdens early in their careers (in part just because they are minorities and because institutions greatly need minority administrative participation), and pressures from their communities to contribute clinically, administratively, and politically, all

of which reduce the time and energy available for pursuing research interests (4). Contemporary institutional pressures add to these problems (5).

Developing minority mental health services researchers matters for several reasons. First, minority researchers bring unique perspectives to research questions and strategies concerning access, delivery, and effectiveness of care in minority and underserved populations. Second, minority researchers may form more effective collaborations with community-based agencies and staffs and better develop and maintain relationships with the clinical-administrative infrastructures in the communities where the research is being conducted.

To achieve these goals, specialized programs fostering the development of minority researchers are essential. Since mentorship and supportive peers and role models are so important in developing research careers, the relative lack of senior minority researchers and peers often places aspiring junior minority trainees at a disadvantage relative to their nonminority colleagues. Specialized programs and proactive networks are currently the only mechanisms through which minority trainees can hope to obtain these benefits.

Few programs that focus on minority faculty research development in health services and mental health-related social science research currently exist. Notable activities include a faculty scholars program at the University of California, Los Angeles, that focuses on minority-oriented mental health services research (6) and training available through the American Indian and Alaska Native research programs at the University of Colorado that focus on health services research (7). However, both programs require that trainees physically move to those locations to obtain training, an impossible requirement for many because of professional and personal circumstances. The American Psychiatric Association (APA) and the National Institute of Mental Health (NIMH) together offer the Program for Minority Research Training in Psychiatry (PMRTP), offering research training fellowships for qualified minority applicants. APA also offers minority fellowships, not specifically geared toward research training, sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA) and by the pharmaceutical industry (8).

Starting in 1998, faculty members in the Departments of Psychiatry and Family and Community Medicine at the University of New Mexico (UNM) developed and implemented two NIMH-funded programs that focus on mental health services research training for minority junior faculty members and graduate students. Our purpose has been to develop programs whose graduates would help address mental health problems of the state and the region. Our experiences may benefit others planning similar activities.

Bases of the Programs

Our initial program, funded by a NIMH-funded Minority Research Infrastructure Support Program (MRISP), was inspired by the needs and interests of Hispanic and American Indian junior faculty members in our departments. For this program, our specific aims were to develop the research capacity of junior minority faculty and graduate students (primarily American Indian and Hispanic) at UNM to conduct rigorous mental health research within primary care settings; to increase the institution's capacity to conduct mental health research among minority populations within primary care settings by developing close collaborative linkages with community-based organizations serving American Indian and Hispanic populations; and to facilitate minority-focused research collaborations between the Departments of Family and Community Medicine and Psychiatry.

Funded at approximately \$250,000 per year for a period of 3 years (February 1998–January 2001), this program included support for a core group to provide administration, biostatistical consultation, and data management; expert consultants based outside UNM; and two funded

junior faculty research projects. With the program's inception, our group started to meet weekly for seminars and supervision, and the funded junior faculty members also began to meet individually with their mentors and consultants. Numerous additional junior faculty from our departments, as well as graduate and postgraduate students who were not funded by the grant, also attended these seminars and received varying degrees of mentoring.

The second and ongoing program, which evolved from the MRISP, is the New Mexico Mentorship and Education Program (MEP). Separate NIMH funding for this program has underwritten activities that include annual institutes with participation by recognized minority investigators in mental health services research. For this program, we expanded the opportunities for mentorship and education to additional minority trainees based at UNM, at other Southwest educational institutions, and, increasingly, around the country. Initially funded in 1999, the MEP proposed to teach trainees ("mentees") basic research methods, emphasizing the writing and management of grant proposals; to introduce them to important mental health services research findings, emphasizing disparities affecting Hispanic and Native American minority populations; to network mentees with mentors; to help mentees "career build"; to produce an "exportable" training curriculum; and to initiate an annual and ongoing training process. The program was funded at approximately \$150,000 per year between 1999 and 2005 and has been approved for approximately \$250,000 per year between 2005 and 2010.

Training Activities

Minority Research Infrastructure Support Program

The MRISP provided individualized and group learning for junior minority scholars at UNM. Activities included a weekly meeting in which participants focused on planning, project review, supervision of the funded projects, and presentations by MRISP members and others about ongoing research. Attendance included the directors, investigators, faculty, and staff from the biostatistics and data management group, other minority faculty, graduate students, and research assistants. The MRISP also offered administrative support and technical assistance in computer programming, data management and analysis, and statistical and psychometric consultation.

Mentees availed themselves of mentoring from experienced faculty members at UNM and other institutions, in particular the University of Colorado and the University of Medicine and Dentistry of New Jersey (Rutgers campus). Trainees' efforts focused on a variety of areas, including surveys of American Indian youth; clinical studies of abuse, posttraumatic stress disorder, and other psychiatric disorders seen in veteran and American Indian women in different primary care settings; pharmacological treatment of mental health disorders in primary care settings; the impact of training heroin users and their social groups in the use of naloxone in overdose situations; caregiving at the end of life in native communities; complementary and alternative treatments in American Indian communities; and the impact of mental health policy changes on mental health services for American Indians. This program also facilitated the hiring of numerous minority students at UNM as research assistants and the completion of several Ph.D. dissertations and M.D. and Master's degrees by various minority students.

Mentorship and Education Program

The MEP has addressed the desired aims through several yearly intensive 1-week training institutes coupled with longer-term mentorship throughout the following years. The grant has covered travel expenses for the mentees and faculty, honoraria for the mentors, and administrative and conference costs. To attract suitable mentees from the region and, increasingly, across the country, we have disseminated information about the MEP widely by

word of mouth and mailings from the program directors, national faculty, and mentees from UNM and elsewhere. We have selected new mentee cohorts based on nominations and the nominees' statements of interest and intent. Ongoing evaluation of mentees' needs and feedback inform planning for each institute. Fourteen mentees participate in each cohort; all have elected to remain in the program for 2 years, and several have remained on as junior mentors.

At each institute the faculty mentors, including several prominent, internationally recognized researchers, present pertinent current research concepts, methods, and findings. The contents of these sessions are planned based on the mentees' stated needs and areas of research. Extensive program teaching manuals distributed to trainees include supplemental lecture notes, PowerPoint slide sets, and pertinent publications. For individual one-on-one mentoring with mentees, mentors have been assigned based on the congruence of their specific research expertise, interests, and background.

Training institutes have emphasized the following activities: a didactic curriculum including panel presentations, tutorial sessions, one-on-one mentoring, perspectives of the community advisory board, informal get-togethers, and peer support groups. Illustrative topics included in the didactic curriculum of the annual institute are outlined in Appendix 1.

Tutorial sessions have provided mentees with opportunities to present their evolving research proposals for group discussion and specific supportive feedback from faculty and other mentees regarding research design, implementation, funding strategies, and career development.

By means of *one-on-one mentoring sessions* between mentors and mentees during the institute, mentees and mentors identify specific objectives for research and career development, areas where the mentor can provide advice and support, plans for meeting the mentees' objectives, and strategies for accomplishing the ongoing mentorship process for the year. UNM-based mentors meet with local mentees frequently. External mentors have spoken regularly with mentees by phone and have met in person, as feasible. Mentors also make themselves available to help advocate their mentees in negotiations concerning key requirements for successful career development, including protected time for research, administrative support, and space.

The institutes prominently feature *sessions provided by the program's community advisory board*. Representing ethnic communities and advocacy organizations, panelists discuss the realities of research in minority and rural communities and highlight opportunities for community-based participatory research that actively involves local communities in research design, implementation, and follow-up. A major publication in a primary care journal has presented the perspectives of MEP community advisory board members (9). Lessons learned here may result in easier entry to communities with major mental health disparities, including a reduction in time to establish trust (10).

Informal get-togethers also take place. At dinners and parties, faculty members and mentees get to know one another, further promoting a sense of collegiality and group identity.

After the annual institute, each cohort of mentees holds regular conference calls as a *mentee support group*. This activity complements the mentorships by providing opportunities to address the challenges that junior minority faculty and graduate students face within academic institutions. The support group also counters the sense of isolation that academic positions often engender for young minority faculty.

Results

Briefly, although not universally so and not attributable solely to these programs, both the MRISP and MEP have led to successful outcomes as judged objectively (publications, funded proposals, promotions) and subjectively (extensive quantitative and qualitative assessments of the mentees). Post-MRISP funding for the 11 initial UNM-based mentees has included two funded K awards, a NARSAD (National Alliance for Research on Schizophrenia and Depression) award, a NIMH minority supplement to an R01 (a very helpful funding mechanism), several small university-sponsored seed-grant awards, and industry-sponsored grants. Grant submissions by others in this cohort still under review include submitted K, R01, and VA research grants. Of this group four have now been promoted to associate professor. Only three are no longer engaged in research or scholarly activities.

Of the initial eight non-UNM mentees who participated in the MEP, one has received a funded R01, three have received funded K awards, and another has received foundation funding. Of this group, three have already been promoted. Universally, the mentees have valued their experiences and have ascribed different aspects of their ensuing successful career development and advancement to various MEP components and activities. For example, as of 2004, 29 MEP mentees in the first two cohorts had submitted 31 grant proposals, of which 24 eventually have been funded.

With regard to both the MRISP and MEP, since so many temporal and organizational shifts occurred in each department and institution, no realistic “prepost study” to assess the specific impact of these programs on the career development of the mentees is feasible. It is impossible to say, for example, how the careers of mentees involved in these programs would have evolved in the absence of the MRISP or MEP. However, at UNM—far fewer minority faculty had received research grants or been promoted in either psychiatry or family/community medicine in the decade prior to these programs. The strong sense among non-UNM mentees is that MEP-related activities have contributed considerably to the academic successes these individuals have thus far achieved. A more complete presentation and analysis of the results of these efforts is published separately (11).

Challenges

Several challenges, commonly described by mentees, have become evident, including conflicts about competing personal needs; divergent demands of family, peers, communities, and institutions; and conflicting personal values of research versus providing service to their communities. Mentees have struggled with wanting predictable and secure salaries, not easily secured when funding depends on grants. Among clinicians, clinical demands often have taken precedence to research; dependable clinical salaries have proven alluring. Some junior faculty members have decided to pursue clearly important high-level administrative careers within minority-focused institutions. Understandably, some clinicians with growing interests in research have required firsthand experiences to select the research fields about which they feel most passionate and for which they are best suited; in some instances they have chosen to pursue biological problems rather than services research. Mentees based in teaching institutions that do not emphasize research have found that heavy teaching or administrative assignments may preclude research. Throughout the course of the MRISP and MEP, discussions with individuals and groups of mentees regarding the competing demands of personal lives and careers and conflicts within career paths have been at the forefront of our work. These considerations concern how to prioritize, compromise, contend with, and resolve the inevitable conflicts and role strains that arise in the course of academic careers.

Discussion

Despite these challenges, many of the junior investigators have obtained K awards and other grants within 2 years after joining these programs, suggesting that our efforts have been helpful. This perspective is strongly supported by the mentees' evaluations.

Based on our experiences, we believe that successful training programs must go beyond high technical standards. These programs must also provide encouraging mentoring within networks of social support that acknowledge important problems generated by societal prejudices, stigma, and emotional legacies of discrimination and historical trauma.

Finally, we have learned that the funding and infrastructure required to maintain such programs remain fragile and require sustained support by NIMH and other agencies. Funding for these programs simply does not materialize without such assistance and other synergistic funding sources. With such resources, we conclude that focused efforts in training minority junior faculty and graduate students in mental health services research can facilitate career development.

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APPENDIX 1

Illustrative Didactic Curriculum of the Annual MEP Institutes

Research Methods (tailored to mentees' needs)

Selection of research questions

Research design

Research ethics

Dealing with Institutional Review Board requirements for human subjects

Data collection using structured and semi-structured diagnostic instruments

Principles of quantitative and qualitative data analysis

Pertinent statistical techniques

Clinical epidemiology in mental health services research

Collaborative methods in community-based participatory research

Multi-method research including pertinent ethnographic techniques

Experimental and quasi-experimental methods

Outcomes evaluation; intervention research

Links between research findings and policy making

Grant Applications and Management

Writing proposals

Funding concerns in career development

Mock NIMH review group sessions conducted by suitably experienced faculty

Realities of getting proposals funded, including networking, informal communication, and shepherding through internal and external review committees

Budgeting time, effort, and funds; negotiating for protected time and resources for research; selecting and managing a research team

Statistical analysis

Choosing and working with consultants

Balancing research with other professional and personal activities