Brief Opinion

Remote Mentorship in Radiation Oncology: Lessons to Share

Crystal Seldon, MD,^{a,}* Winnifred Wong, DO,^b Reshma Jagsi, MD, DPhil,^c Jennifer Croke, MD,^d Anna Lee, MD, MPH,^e and Lindsay Puckett, MD^f

^aDepartment of Radiation Oncology, University of Miami Miller School of Medicine, Sylvester Comprehensive Cancer Center, Miami, Florida; ^bDepartment of Radiation Oncology, Joint Radiation Oncology Clinic, David Grant Medical Center, Travis AFB, California; ^cDepartment of Radiation Oncology, University of Michigan, Ann Arbor, Michigan; ^dDepartment of Radiation Oncology, University of Toronto, Ontario, Canada; ^eDepartment of Radiation Oncology, The University of Texas MD Anderson Cancer Center, Houston, Texas; ^fDepartment of Radiation Oncology, Medical College of Wisconsin, Milwaukee, Wisconsin

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Mentorship is a key factor in promoting and maintaining fulfillment in medical practice. Invariably, physician success stories usually have a common thread: an important mentor, or mentors, whose guidance proved

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*Corresponding author: Crystal Seldon, MD; E-mail: crystal. seldon@jhsmiami.org

invaluable. Finding mentors has been noted as a challenge for women in radiation oncology given low representation in the field.¹ In 2019, women comprised only 17.4% of department chairs and program directors and 30.7% of faculty.² Digital, or remote, mentorship seems an ideal solution to connect women mentors and mentees, especially given findings that over a quarter of female residents train in programs with less than or equal to 2 female faculty.³ In 2018, the Society for Women in Radiation Oncology founded a mentorship program to fill this unmet need, creating over 100 pairings. Participants were paired with members from the next training level up (ie, medical students with residents, etc) unless a specific request was made. Mentees were encouraged to make the initial introduction. We believe this to be the largest initiative of its sort in the field of radiation oncology to date. Given growing interest in using remote mentorship to encourage students to consider radiation oncology and to help trainees to succeed, we write to share lessons from our early experience with this program.

In our program, mentees and mentors were paired based on preferred commonalities such as geographic region and disease site interest. Afterward, an institutional review board exempt, anonymous survey (Supplementary Materials) was administered to 127 eligible program participants from June to July 2020. Questions were created that related to the following domains: professional characteristics, ethnicity, communication

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Disclosures: C.S. and W.W. are the current cochairs of the Society of Women in Radiation Oncology (SWRO) mentorship committee. A. L. and L.P. are former chairs and serve as advisors to the SWRO organization. R.J. and J.C. serve as advisors to the SWRO organization. R.J. has stock options as compensation for her advisory board role in Equity Quotient, a company that evaluates culture in health care companies; she has received personal fees from Amgen and Vizient and grants for unrelated work from the National Institutes of Health, the Doris Duke Foundation, the Greenwall Foundation, the Komen Foundation, and Blue Cross Blue Shield of Michigan for the Michigan Radiation Oncology Quality Consortium. She has a contract to conduct an investigatorinitiated study with Genentech. She has served as an expert witness for Sherinian and Hasso and Dressman Benzinger LaVelle. She is an uncompensated founding member of TIME'S UP Healthcare and a member of the board of directors of ASCO. C.S. received an honorarium for her participation as a panelist on Elekta's "Championing Women & Diversity in Radiation Oncology: A Panel Discussion."

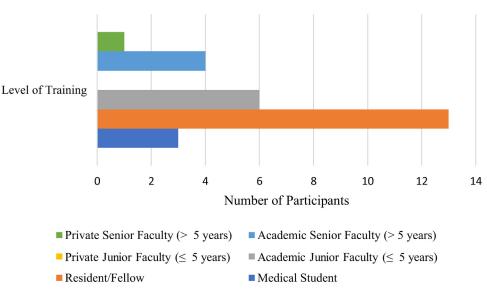


Figure 1 Professional characteristics of survey respondents.

details, pairing satisfaction, and program satisfaction. Many of the questions incorporated a 5-point Likert scale to describe the level of agreement with the provided statement (ranging from "strongly disagree" to "strongly agree"). There were also open-ended questions for which coding was developed once responses were collected. Ultimately, 27 members answered the survey (Fig 1). Fifty percent of participants were in their pairing for less than 1 year. Despite a low response rate (22%), open-ended questions garnered valuable information that may have immediate relevance as the field embraces remote mentorship in the current environment.

One commonality 23% of respondents noted was a lack of compatibility with their pairing(s), which led to the dyad's demise. When asked if they would like to continue with the same mentor/mentee pairing, one respondent answered, "Did not really develop a relationship with mentee." Another respondent wrote "Surprisingly, I felt my mentee and I were so different that we did not



Figure 2 Word cloud highlighting compatibility among survey responses.

 Table 1
 Additional lessons gleaned from the SWRO mentorship program assessment survey

Race and culture are important commonality points among pairings.

Location is important in sustainability of pairings.

Guidance is needed from outside the pairing to keep on track. Participants should have the opportunity to change pairings if their current pairing is not fruitful.

Abbreviation: SWRO = Society for Women in Radiation Oncology.

have much chemistry nor was it a fruitful experience... I didn't expect this, so something to consider with future pairings [is] to have a couple points of commonality." Other responses relating to lack of compatibility in the pairing can be found on a supplemental word cloud (Fig 2). Additional information gathered from our study can be found in Table 1.

Other studies have shown that effective mentorship can be established by assigning pairings with mutual personal interests.^{4,5} Pairings based only on similar clinical interests between individuals without compatible personalities can cause the pairing to be unsuccessful owing to the lack of interpersonal reward.^{6,7} In our program, 42.9% reported that they were happy and wanted to continue with their pairing, presumably from commonalities that extend beyond their backgrounds or geographic location. Most of our survey respondents suggested race (17.9%) and geographic location (28.6%) did not affect their pairing success.

Personality is difficult to perfectly capture on paper; however, there are opportunities to establish better matching by asking questions in this vein. One way that has proved fruitful is personality testing, such as by utilization of the Myers-Briggs Type Indicator, to help base pairings on compatible personality types.^{8,9} These results might help evaluate which individuals are likely to have the most cohesive pairings. Ideally, individuals might also be permitted to change their pairings either annually or earlier if compatibility is not found.

Digital mentorship offers a way to connect individuals across our field and provide the unique specificity needed for enduring effect. Given the increased quality and availability of telecommunication due to increased globalization¹⁰ and the events of 2020, remote communication is better now than ever before. The lessons from our experience with encouraging digital mentorship through Society for Women in Radiation Oncology may have immediate implications for others considering similar efforts. We hope that sharing our observations will help others as we continue to seek to identify ways to foster the future leaders of our field.

Supplementary materials

Supplementary material associated with this article can be found in the online version at https://doi.org/10. 1016/j.adro.2021.100686.

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