



## University of Dundee

Comment on 'Mentorship in dermatology

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## Response to “Mentorship in dermatology: A necessity in difficult times”

Dear Editor,

We were delighted to hear Hussain et al extol the benefits of mentorship in dermatology, though we feel that they focused primarily on the clinical development associated with mentorship. Although we join them in welcoming the BAD’s mentorship scheme, we feel that it does not go far enough.<sup>1</sup> The pandemic has brought the need for mentorship into stark relief, but no one who has trained in the NHS for any length of time is unused to the idea of service needs taking priority over their training, and we feel the role for strong mentorship has always been there.

Mentorship is a complex relationship, providing more than educational supervision. Academic and educational support can be given; however, aspects of personal and professional development are also afforded, including a focus on the mentee’s life aspirations and difficulties they might encounter. The benefit of career experience from the mentor is valued, as this can often be hard to come by in a competitive fields such as medicine. Additionally, this unique perspective is difficult to replicate by the mentee’s peers.

The role of mentorship in helping to navigate issues such as discrimination of gender, race and personal beliefs cannot be understated. An increasingly diverse workforce is of benefit here as mentors of minority background may share similar experiences and potentially provide tools to navigate the mentee’s dilemmas while we continue to challenge the systemic biases which perpetuate these encounters.<sup>2,3</sup>

The successful mentorship is often symbiotic, both can learn from one another through intellectual discussion, friendships may develop and morale improved. Ventures may be undertaken such as publication and presentations, successes may be shared. The ego of the mentor should never stifle the mentee, instead an overarching expectation is that the mentee may surpass the mentor with their guidance.<sup>4</sup>

We feel lessons can be learnt from our colleagues in Psychiatry, where weekly supervision has been a part of both the culture of the speciality for decades and is currently a training requirement. That is, 0.25 of a session per week is provided to consultants to spend an hour a week with their trainees to focus on both clinical and related topics. Its importance in helping to develop strategies for resilience and wellbeing has been detailed in their curricula even pre-pandemic.

This long-term supervision with different supervisors over the years of training allows trainees to develop mentor-mentee relationships with a number of different individuals and to reflect on how they might support and mentor their trainees when they complete their training, and what aspects have been helpful or less helpful, setting them in good stead to be the trainers of the future.<sup>5</sup>

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Offering mentorship is key to developing well rounded, resilient professionals. The British Association of Dermatologists' mentoring scheme is a start in this direction, but continues what we consider to be a vital part of training as an optional extra, rather than a core part of training.

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