

EVALUATION OF THE UNDERGRADUATE MENTORSHIP PROGRAM IN AN INDIAN MEDICAL COLLEGE- A QUALITATIVE STUDY

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ABSTRACT

Background: Mentorship in medical students plays a significant role in their personal and professional development. In India, mentorship programs have been mandated by the National Medical Commission only since 2019. Though we have one of the oldest ongoing mentorship programs, it has never been evaluated in terms of the perceptions and experiences of mentors and mentees. Therefore, we aimed to evaluate the quality of mentorship at our institute by using in-depth interviews of mentors and focus group discussion of mentees. **Materials and Methods:** This qualitative study was conducted by focus group discussion of 50 mentees and in-depth interviews of 15 mentors. The recordings were transcribed verbatim and anonymized. A deductive and inductive approach was adopted, and data was analysed with thematic analysis using NVivo software (release 1.6.2). **Results:** Major themes identified were: need for mentorship, preferred qualities in a mentor, benefits and challenges faced during mentorship, and improvement strategies. The mentees reported mentorship provided psychosocial support, academic guidance, personal and professional development, and helped overcoming various challenges. Mentors reported mentorship gave them personal satisfaction, aided in personal development. Some of the hindering factors of the mentorship program included infrequent mentoring sessions, limited communication and personal interaction with the mentors. **Conclusion:** The mentorship program has a positive impact on the mentees' academic and personal growth. The fundamental basis for recommendations to overcome these challenges is derived from the responses provided by the mentors and mentees, which are outlined in the present study.

INTRODUCTION

A medical student's life transitions after entering into MBBS. He is vulnerable to a variety of stressors, such as an overwhelming curriculum, adjusting to new environment, alienation, and a myriad of other issues. It is thus understandable why poor mental health is more common among medical students than in the general population, with high rates of stress, depression, burnout, and suicidal thoughts.^[1] Mentors serve as important pillars as they help medical students to deal with personal and professional issues and encourage the mentee to accomplish both personal and professional goals and aspirations by maximizing his or her potential.^[2] As per various studies, in comparison, students without mentorship have reported lower levels of career support, lower research output, less applicant success, and overall poor psychological health.^[3] Thus, considering the crucial role of mentoring, we require tools to assess the quality of the mentorship program in a medical college. Mentorship program in

Indian medical education system is relatively new and not well developed. Also, there exists a deficit in the Indian medical education system in the form of inadequate research, knowledge, attitude, and practice of mentorship.^[4] Therefore, the evaluation of an existing mentoring program presumes relevance in order to determine the quality of mentorship and to analyse all the factors that could jeopardize the mentoring relationship.^[5] Though we have an ongoing mentorship program, it has never been evaluated yet in terms of perception of mentors and mentees towards the mentorship program. In this study, we aimed to evaluate the mentorship program by a qualitative study using focus group discussions and in-depth interviews.

Aims & Objectives

Aim

To evaluate the quality of mentorship program of MBBS students

Objectives

1. To record perception of mentors and mentees regarding Mentorship Program

2. To identify challenges faced by mentors and mentees during Mentorship Program
3. To make recommendations for improving the Mentorship Program

MATERIALS AND METHODS

Research Design and Setting: This qualitative study was conducted at Christian Medical College, Ludhiana over a time period of 3 months by focus group discussion of mentees and in-depth interviews of mentors.

Exclusion Criteria

The investigators and co-investigators and the mentees allotted to the investigators and co-investigators were excluded to remove any bias.

Ethical Consideration: Informed consent was taken from the participants and ethical clearance from the institutional research and ethics committees was taken. (IECBMHR/202405-194/Aprvl-Mentorship, dated 4th May,2024)

Participant Recruitment: The study population included the present interns (MBBS batch 2019) who have been a part of the Mentorship Program since the last 5 years. The study also included the faculty who have been mentoring them since the last 5 years. A purposive sampling of participants was done.

Data Collection: Qualitative data was collected through focus group discussions with mentees and in-depth interviews of mentors using semi-structured interviews (Appendix1,2).50 mentees and 15 mentors participated in the study.

Study Procedure: The study procedure was briefly outlined to the participants. Those that gave their informed consent were included in the study. Then, over a few days, focus group discussion (FGD) of mentees was conducted and in-depth interviews of mentors were conducted to collect qualitative data using open-ended questioning. FGD was completed by six of these groups of eight to ten students each, and in-depth interviews of 15 mentors was completed by when data saturation was achieved.^[6] The conversation was audio recorded and the participant's privacy and confidentiality maintained. This was followed by transcription of the sessions verbatim on Word Processor file.

Data Analysis: The sessions verbatims were uploaded on NVivo software (release 1.6.2) to organise and analyse the unstructured data. During analysis, researchers focussed on two groups-mentors and mentees. The text was read carefully several times and sections that matched certain themes or patterns were labelled., which helped the researchers to organise key ideas from the interviews. The goal was to clearly define and sort all parts of the interviews for both groups, and thematic analysis was used wherein common themes and subthemes were identified using inductive and deductive approach.^[7]

RESULTS

Findings of Focus group discussion of mentees and in-depth interviews of mentors.

Table 1: Qualitative themes and subthemes with participant perspectives

Themes and sub-themes	Description	Participant Perspectives
Need for mentorship -Adjust to new environment -Overcome various challenges -Motivation -Guidance -Interaction and Bonding -Role Modelling	There was felt a requirement for mentorship programme from both mentors and mentees for various issues faced in a Medical College.	It's because when we come from school, college is a very different environment and it is very hard for a lot of students to adapt into the medical college even the studies and how to manage, so they can really help you with that to adjust into college and if you have problems academic, social or any other they can help you through them so I think mentorship is important... A Mentee Because I've seen students who come here who actually needed some support and help. They were, they used to panic, they needed help with their studies, with their health issues. So, mentoring, yes, is a good thing... A Mentor
Preferred qualities in a Mentor -Approachable -Non- judgemental -Unbiased -Good communicator -Empathetic -Genuine mentorship -Role Model	The questions posed to the mentees derived various qualities which the mentees preferred in a mentor	The mentor should be approachable and I think the mentor should treat a student as their own children so that they can have the feeling of the family and mentee should student can tell any problem without any hesitation and should not be judgemental to the mentee so they can also help in their personal problems... A Mentee ...and good communication skills like clear and effective communication for feedback advice and encouragement, with integrity demonstrating ethical behaviour and professionalism, set a strong example for the mentor to follow...A Mentee
Benefits Mentees -Psychosocial support -Guidance -Overcoming obstacles Mentors -Personal Satisfaction -Self – Development -Understand students'	There were various benefits which both mentors and mentees derived from the Mentorship Program	Yeah mainly she was a good friend to me throughout especially during my final prof time also which was very stressful I had number of breakdowns but she was there through almost all of the breakdowns, so yeah... A Mentee During my prof times he used to personally call me and ask about how the studies were going, as well as tell our seniors to help us out by marking our books. Also during times when we were sick he used to send medicines and food over... A Mentee As a mentor you really feel good that you're able to guide somebody in a meaningful way. You see students coming as first years, second years, I mean they become doctors and then go or even the post-graduation.

perspective Both -Meaningful long lasting relationship		So then also we see them later on and we feel glad that we could do something in their in their growth and in their career..... A Mentor If you develop a relationship with them, they look up to you and they slowly and gradually start opening up and become like an extended family... A Mentor
Challenges Mentees -Reluctance -Logistical issues Mentors -Time Constraints -Lack of information -Over expectation of mentee Both -Lack of initiative - Personality traits shy, introverted -Language and Cultural barriers -COVID 19	The challenges faced by mentors and mentees during mentorship were of various kinds.	I feel like communication and hierarchy are one of the two barriers that is very there because I mean I think from both sides, also like technically the junior should approach the teacher but when you come in first year you're not that like open and you're not able to actually do that and obviously the teachers or the professors are very busy and it is not right of us to assume they would approach.... A Mentee We were informed by our mentees that you know you are our mentors, so I think the faculty should have proactively informed us and told us and we would have more actively got involved much earlier... A Mentor and other thing is leniency. They think they can get away with anything by, or by not coming for classes or work and expecting me to give them off... A Mentor
Improvement Strategies -Sensitisation of mentees and mentors -Assigning mentors thoughtfully -More academic mentoring -Individual mentoring sessions -Regular feedback	The questions posed to the mentors and mentees derived various ways to implement and evaluate the program in a better manner.	..May be better developed if both the mentee and the mentor briefed before joining the mentorship programme about what it actually is what are the benefits of the mentorship programme, how do you implement it along the five years and it should be evaluated periodically.. A Mentee So if there is a minimum requirement that needs to be met, and is conveyed that would be good. It will give us an idea like when to call, how to call and how to meet... A Mentor But we realized that the thing that really works is the one when you call them alone, they open up and can share their problems..... A Mentor

Theme1: Need for mentorship in Medical Profession

Both mentors and mentees felt strongly for the necessity of a mentorship programme in medical college as students enter college at a young age they are inexperienced and feel lost in the new environment. Almost all the mentees agreed that it is very stressful for students to cope up with the tough academics and get acquainted to a new place altogether. So, a mentor who is an experienced professional is needed to guide them and help them to overcome all challenges faced and give personal and professional guidance.

“Mentorship is a great way to enhance medical school experience as it helps with positive outlook in coping with medical school as mentors are experienced in the field so they can guide their mentees better. It also helps us to cope when we are first coming to the medical school as it's a new experience and also they help in various academic and research opportunities.”

Mentors also emphasised on the need for a structured mentorship program and felt it was needed for overcoming various challenges, be it personal, social or academics and specially providing psychological support.

“I think they are very young and they haven't faced many challenges in their life and it is the first time most probably they are coming out of home and definitely having somebody who is more mature and understanding who has already gone through the same problems in their life before can definitely help them to make the right decisions at the right time”

Some mentors also believed that it is important to be a role model and help in their personal and professional development and motivate them to become better in every aspect.

“Probably they are also far away from their parents and siblings and loved ones. So they are also seeking for someone who would play a role model as probably what the role their parents play, So they start searching that kind of an image in you. So I do believe it makes a difference and we have had these experiences”

Theme 2: Preferred Qualities in a Mentor as perceived by Mentees

The mentees believed that the mentor should be accessible and approachable and should be genuinely concerned and interested in mentoring and not viewing mentoring as a mere responsibility. Many mentees also felt that the mentors should guide them in a constructive manner and be motivating, encouraging them to push forward.

“A mentor should be approachable and willing to invest time in their mentor offering support whenever needed and good communication skills like clear and effective communications should be needed for feedback advice and give encouragement and have ability to give constructive feedbacks”

Most mentees perceived that the mentor should be person they look up to and be a role model for them to follow and provide academic and career guidance. Students also shared that the mentor should also be non-judgemental and empathetic so the students can share their problems without hesitation.

“I would prefer my mentor to be non-biased and listen to my complaints and whatever issues I have

without judging me first of all and secondly should be empathetic if the problem is big”

Theme 3: Benefits of Mentorship Program

Through this program both mentors and mentees agreed to have gained substantive benefits on a personal and professional level.

Mentees expressed they were able to adjust and overcome various personal and academic challenges, day to day problems because of the mentor’s support and guidance.

“We had a setback in first year so everyone was scared with this new curriculum and like a lot of backs so in that time my mentor like helped me a lot he like there was every time before exam I had anxiety issues and in that time my mentor stood up next to me and in a positive way it did help me a lot.”

“I had an injury related to my back and during those times my mentor was there to look out for me and my mentor who's actually a neurosurgeon he was there throughout that experience giving me guidance and help as well as valuable advice on how to overcome this challenge.”

The mentors expressed that they gained a sense of satisfaction helping students which had a positive impact on them and it helped them to grow personally and professionally. Mentoring also helped them to understand students’ perspective and struggles in a better way

“Because when you mentor somebody you also feel very good that you guided somebody in the correct way and yes and they also give good feedback”

Some of the mentors and mentees felt that they developed strong interpersonal and meaningful life-long relationship during the mentorship program

“If you develop a relationship with them, they look up to you and they slowly and gradually start opening up and become like an extended family.”

Theme 4: Challenges faced during Mentorship Program

Some mentees expressed that initially they felt reluctant to approach the mentor because of the hierarchy in medical profession and found it difficult to open up and discuss their problems with the mentor in front of a group of students.

“I think for me approachability and reachability towards my mentor was my biggest issues the reason being I could not reach them as I was hesitant and shy to talk in front of everyone but neither did they take initiative”

Few mentees also reported that they faced certain logistical issues, as when certain mentors who were allotted to them resigned and left, they were left without any mentors as no re-allotment was done.

“The mentor was quite unreachable, he never called me and so I could not experience any of the things my other fellow said and then he resigned and left and there was no re-allotment”

Mentors expressed that they have a busy schedule and time constraints due to work and family commitment which was a major challenge to mentoring. Some mentors felt that few mentees

expected the mentors to favour them and try to take undue advantage.

“I feel that the time constraint, time I cannot increase 24 hours, you are overworked at that point of time, it is not easy to mentor somebody”

“They try to overwhelm you they think that ok I have been to their house so he is my pal so that line you have to draw ultimately.”

Some challenges were common to both mentors and mentees like lack of initiative from either side, difficulty in having a bond due to different cultural and language background. Additionally, people with particular personality qualities, such as introverts or shy individuals, found it challenging to communicate.

“So actually my mentor did not connect with me since first year they did not I guess know that I am their mentee so there was a lack of so that's why I couldn't experience a mentorship programme during my five years at MBBS”

“My mentor used to speak to all other mentees in their language as all of them shared the same language and I used to feel left out and couldn't connect.”

Furthermore, mentors and mentees reported that were unable and thereafter reluctant to meet for nearly two years because of the COVID-19 pandemic.

“There was COVID so like there came a time when almost felt like program is about to dissolve so that was the one barrier that I faced but then luckily we revived it and yeah now it is going on well”

Theme 5: Strategies to improve the program

Both mentors and mentees suggested a few strategies to implement this program in a better manner. Firstly, both groups agreed that they should be sensitised about the program, briefing them the need, expectations and expected outcome of the program. The program should be evaluated periodically by feedback from both mentors and the mentees.

“May be better developed if both the mentee and the mentor briefed before joining the mentorship programme about what it actually is what are the benefits of the mentorship programme, how do you implement it along the five years and it should be evaluated periodically.”

Students also felt that only those mentors who are genuinely interested in mentorship should be allotted and if mentors are busy they should not be given this responsibility. A very few mentors expressed that they don't wish to continue as a mentor in the future.

“So we cannot ask anybody to spend the time their own time on something like this if they don't want to so, they should have interest in doing so, otherwise there is no point, mentorship should not be forced.”

A lot of students expressed that they need more academic mentoring as they are finding it difficult to cope up with the new curriculum and individual mentoring is more beneficial so there should be few one-on-one mentorship sessions also.

“But we realized that the thing that really works is the one when you call them alone, they open up”

Both mentors and mentees suggested that it is a must to take feedback regularly and then taking necessary steps to overcome the challenges faced.

“First and foremost thing is getting reviews just like this interview. Getting reviews from mentors and mentees of regular reviews of how they are doing it, what are their challenges and then working on that.”

DISCUSSION

Formal mentorship in medical colleges for undergraduate medical students has been made mandatory by National Medical Commission since 2019. Though not evaluated, mentorship has been going at our institute since 1970s. The present study has provided the researcher with an opportunity to analyse the perception of mentees and mentors towards the mentorship program using focus group discussion of mentees and in-depth interviews of mentors. [Table 1] Major themes identified were: need for mentorship, preferred qualities in a mentor, benefits and challenges faced during mentorship and improvement strategies. The beneficial outcomes and results of the mentorship program were stressed by both mentors and mentees and both the positive and negative experiences of participants were also examined. Mentorship at our institute had a positive impact on mentees in terms of adjusting to new environment, psychosocial support, academic improvement and personal development. Numerous advantages of mentorship for medical students have been reported worldwide, including professional guidance, enhancement of skills, research output, personal and professional development.^[8,9] Mentorship also assists young graduates in making early decisions about specialised training and in embracing a more goal-oriented approach.^[10] According to a novel paper published by Singh T et al, one of the mentor's most important quality is approachability.^[2] This was evident in our focus group discussion also wherein majority of mentees expressed approachability as one of the important preferred quality in a mentor. Other notable preferred qualities desired in a mentor as expressed by mentees are effective communication skills, empathy and unbiasedness. While both groups need good listening skills, it is indispensable for the mentor as it demonstrates true concern and genuine interest of the mentor. During FGD and interviews, both groups expressed that by demonstrating genuine interest in the mentee's development, a mentor can boost the mentee's self-esteem and sense of confidence and motivate them to attain their full potential and hence play a crucial role as providers of psychosocial support and academic guidance and overcoming challenges. These results were consistent with a study by Sparshadeep et al. in which most students expressed having a mentor is beneficial for their emotional and personal growth.^[11] One of the major obstacle hindering career advancement in medicine is lack of mentoring.^[12] Having a mentor increases the

odds of engaging in research during medical school and is associated with junior academic physicians' higher research production.^[13,14] During FGD one of the mentees described a role model as the one with humanistic personality qualities, clinical excellence with effective teaching abilities, inspiring the students to strive to be like them which reinforces the importance and necessity of a mentor who is also a role model for the professional and holistic development of the mentee at a medical school, which is well supported by various studies.^[2,11] Role modelling is the most outstanding and aspired quality in a mentor. Role models are “individuals admired for their ways of being and acting as professionals”.^[15] They are a real inspiration and lead by example and influence the development of a student into a professional. According to a study, while mentors influence students' journey toward their goals, role models influence who they aspire to be.^[16] The majority of mentors reported that the mentorship program enhanced their communication skills, enabling the mentees to discuss their issues with the mentors in a nonthreatening environment. Similar results were reported by Usmani A et al. who reported that the communication between mentees and mentors improved, enabling the mentees to talk about their issues with the mentors.^[17] During interviews, mentors expressed that they were able to understand the problems faced by the students; which helped them to develop more empathy for the students. Bhatia A et al, reported similar results, stating that mentors were able to empathize with students better after learning about their challenges.^[18] Some of the challenges that the mentees reported during the FGD included infrequent mentoring sessions, limited communication and limited personal interaction with the mentors. During focus group discussions and mentor interviews it was felt that one of the challenge to mentorship program is accessibility and approachability as medical mentors have other core commitments. They are busy in their clinical practice, family life and have time constraints.^[19] Also, due to the hierarchy in medical profession and seniority of the mentors some students are reluctant to open up and discuss their problems. Other hindering factors in our study included lack of initiative from either side, difficulty in developing a bond between mentor and mentees due to different cultural and linguistic background. Mentorship is not the sole responsibility of a mentor but is reciprocal and based on mutual trust and understanding.^[2] A research conducted at Great Western Hospital in Swindon on the mentorship program of final-year medical students and junior doctors revealed that while 96% of students thought it was a good idea, some believed they didn't need a mentor and 20% didn't want to communicate with their mentor at all.^[19] Similar concern was expressed by some mentors during in-depth interviews. Therefore receptiveness of the mentees is also crucial for successful and effective mentorship.^[14] A very few mentors expressed that did not wish to continue as a mentor

for the future batches during in-depth interviews. Though there are hindering factors and challenges, both mentors and mentees unanimously agreed that mentorship is a necessity and crucial part of the medical school curriculum and experience and the program should be continued. As per the suggestions and insights provided by the mentors and mentees, these challenges may be overcome by complying to the following recommendations: a) sensitizing both mentors and mentees on the need, expectations, responsibilities and desired outcome of the program b) clearly defining measurable short term and long term goals of the program c) allotting mentors who are genuinely interested and committed to mentorship d) adjusting frequency of meetings based on the need of mentees and mentors along with need based individual mentoring e) regular feedback and evaluation from mentors and mentees using validated assessment tools.^[20]

Limitations

This was a single center study with a small sample size. A multi-centric study with multiple batches of medical students will yield a more rich data. Providing the mentors and mentees with additional prompts related to the study from literature would have broadened their views and responses. The FGD had limited questions probing the role of mentees and mentors in the mentee-mentor relationship, addition of more targeted interview would have aided to delve deeper into the students' and mentors perceptions of the mentee's role in the mentor-mentee relationship.

CONCLUSION

Mentorship program for medical students is essential for nurturing good professionals. Mentorship in our institute had a positive impact on mentees in terms of adjusting to new environment, psychosocial support, academic improvement and personal development. Mentors also benefitted from mentoring the students in terms of improvement in their communication as well as teaching skills and building meaningful relationship with students. Some of the challenges of the ongoing mentorship program included infrequent mentoring sessions, limited communication and limited personal interaction with the mentors.

For the successful implementation of the mentorship program it should be well-structured with clear measurable defined goals and outcomes. The program should be evaluated regularly using validated tools to see if it is meeting the desired goals as well as outcomes and the shortcomings identified should be rectified.

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