Mentorship is a formal or informal relationship built usually between a more experienced person in a field (mentor) and a less experienced person (protégé or mentee) and is basically aimed at transmitting knowledge or enhancing professional experience. It is the third most important relationship that shapes human behaviour (after family and couple relationships) and is the second most important step to career success after formal education. Classical mentorship is a practice in which the mentor ‘guides’ the mentee on a one-on-one basis. There are also models of peer mentorship which take place between or among people (e.g. groups) of similar expertise. Classical mentorship is commonly practised in basically all academic fields. In business, research has recognised the advantages of many forms of mentorship, and many companies offer mentoring programmes.

Barondess showed the historical importance of mentorship in shaping the medical scientific community and explained the origin of the word ‘mentor’. Mentor was an important person in Homer’s Odyssey. During the Trojan War, Odysseus left his wife, Penelope, and son, Telemachus, to the care of his best friend, Mentor. Mentor practically raised Telemachus into manhood, and Athena, the goddess of wisdom, took the form of Mentor during the difficult and critical times. Barondess continued that mentoring is in a way a ‘gift of the gods’.

Why engage in mentorship?

Mentorship seems to be a win–win situation because it is a mutual relationship. The obvious advantages for the mentee include receiving training, benefiting from the greater experience and understanding of the mentor, and expanding one’s professional network, thus enhancing the potential for career advancement.

Mentors also receive substantial benefits from such relationships. Aside from enhancing their expertise and professional recognition, they have the opportunity to obtain a fresh perspective from their mentees. Therefore, in academia, mentors are more satisfied with their careers and have higher research productivity. Mentors also increase their self-confidence and improve other skills such as communication, understanding, and problem-solving. In companies, a mentor increases professional connections even if the mentee leaves the company.

Since mentorship accelerates processes of identification and orientation within an organisation, companies and organisations which practise it tend to have a lower member turnover rate, higher job satisfaction, a higher probability of retaining good people, and a more highly developed organisational or company culture. In a study of mentoring programmes, for example, 25% of people in a mentoring programme increased their salaries, mentors were promoted six times more that those who were not, mentees were promoted five times more than those who never had mentors, and retention rates were higher for mentors (72%) and mentees (69%). Moreover, return on investment was calculated to be at least 600% of programme costs.

In general, mentorship fosters an environment where everyone helps each other. Therefore, the
profession itself (e.g. sales, scientific research) benefits especially because of collaboration and greater focus on organisational growth instead of personal achievement. Moreover, Barondess explained that mentoring seems to be a self-perpetuating phenomenon in that mentees also become mentors. This can lead to the increased practice of a common set of professional values.

**Implications of mentorship in EMWA**

Although EMWA offers a very good educational programme, especially for new medical writers, there is no mentorship scheme within EMWA. It is very important to introduce such a scheme in EMWA because it will help ‘bridge the gap between theory and practice’, especially for freelancers, who do not have the advantage of a close working relationship with other medical writers.

A mentorship scheme can inspire and encourage new medical writers just as it does in medicine. Mentorship can also strengthen EMWA by helping newcomers identify with the goals of the organisation and adding to the feeling of genuine membership.

In medical writing, mentorship can be used to develop a responsible understanding of ethical principles relating to authorship, confidentiality, honesty, and integrity. An inexperienced medical writer may not automatically adhere to ethical principles. A clear awareness of these principles is just the first step. Inexperienced medical writers may ignore these practices not only due to naivety but also through the dire necessity of obtaining experience. Landry mentions confrontations that she had with her professional values. For example, she was asked by a prospective employer to show work she had done for another company and to manipulate data to impress a prospective employer. A mentor could have been useful in this situation by acting as a genuine model for appropriate professional behaviour. Thus, mentorship serves as a social control mechanism that can protect the integrity of the medical writing profession.

Mentorship guards the interests of more senior freelance medical writers as well. As many would-be medical writers do not have experience in the pharmaceutical industry, freelancing is the only alternative. In order to obtain much needed writing experience, most are willing to accept jobs that are paid below the standard level. This is not advantageous to anyone and can be prevented via a mentorship programme which seeks to instill in new medical writers a common understanding of acceptable work standards and business practices for medical writing professionals. A mentorship programme may even lead to a higher productivity and economic gains for senior freelance medical writers as junior medical writers are eager to learn with little or no financial compensation. Moreover, they are highly motivated so that one can expect a good-quality performance which will even get better as time goes by.

**How can EMWA go about a mentorship scheme?**

First of all, it must be recognised that not everyone can participate in a mentorship scheme because some personality types (e.g. too bureaucratic, egotistic, or independent) are not suited to it. Mentors should have good coaching skills, but these skills can be learned and harnessed. Most importantly, mentors must be committed to their role. Taking part in a mentorship scheme should thus be voluntary and goals should be well understood.

Historically, informal mentorships have been noted as more successful than structured, formal mentoring schemes. Mentorship classically parallels a parent-child dyad, which is why mentors usually train mentees like themselves. However, as career patterns nowadays have changed and individual priorities differ, a formal mentoring scheme may be more beneficial for all concerned and may prevent obstacles and avoid possible disadvantages of this relationship. For example, strategically clear mentoring schemes can identify whether there is compatibility instead of relying on chemistry between mentor and mentee. Aside from that, roles and expectations of mentors and mentees can be explicitly defined. This allows transparency and makes it possible for the success of mentorship to be evaluated. Inter-gender obstacles can also be prevented if there is transparency in the relationship.

The duration of the mentor relationship can be defined at the beginning. This not only prevents mentees from depending too much on their mentors, but it also can prevent mentors from exploiting their mentees.

Because mentorship is a flexible activity, the time investment should not be a constraint in medical writing mentorships, especially if defined from the beginning. A mentee’s involvement in a project can be planned and organised.

Email, Skype, and the like make effective distance mentoring possible. However, transmitting sensitive information and learning how to understand nonverbal cues such as pregnant pauses, change in voice tone, tempo, and volume can be challenging using long-distance communication.
Mentoring consultants\textsuperscript{2,15} offer steps for carrying out a successful mentoring programme, including rules, guidelines, and tips.\textsuperscript{5} EMWA can learn from these materials and devise a programme of its own, although trained consultants may be more helpful.

**Conclusion**

Edwards\textsuperscript{10} shared her experience on designing and carrying out a mentoring programme within a medical writing group in a clinical research organisation and described the benefits her company gained through it. Such an organized mentorship programme seems to be lacking in EMWA. The issue was raised during the Freelance Business Forum at the 35th EMWA Conference in Berlin\textsuperscript{16} and should be seriously considered not only by freelancers but also within the EMWA educational programme.

**References**


**Author information**

Joselita T Salita completed her PhD (Biology) at the University of Bremen under a German scholarship programme. She has published scientific articles on seagrass-fish ecology, including her dissertation, which was graded \textit{magna cum laude}. Thanks to meticulous taxonomic work at a museum in Bremen and experience in organizing exhibitions, she discovered a love for detail and writing creativity. Joyce joined EMWA in 2009 and has been freelancing as a medical writer, translator, and ESL teacher since then. She has been a member of the Editorial Board of Medical Writing (formerly The Write Stuff) since 2010.