

## Personal Perspectives on Mentoring

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Mentoring has been an essential component of my training and my career in gastroenterology. I have enjoyed a wonderful experience in gastroenterology and, as a woman, have a somewhat different perspective on the role of mentorship in medicine and

gastroenterology. However, complex professional and personal situations are not unique to women and the general principles of mentorship are broadly applicable to career development for men or women.

At every stage of my career, I have received useful suggestions that have shaped my decisions, identified a niche that suits me, developed my skills, and provided guidance and feedback on how “the plan” was working. These colleagues and mentors led me to choose medicine and gastroenterology and helped to develop my career in academics. Having the benefit of being associated with GI programs at 4 different institutions, I believe that the most important aspects of mentorship are based on the personality of the professional environment and the ability to find a good “match” from the pool of mentors every program has at its disposal.

I was fortunate to train at McMaster University, which, as I appreciate more now, provided a rich experience in an innovating and inspiring environment that focused on the positive and moved past the impossible. This is an institution that gave the medical profession evidence-based medicine (deemed as one of the top 15 medical developments by the *British Medical Journal*<sup>1</sup>) and problem-based learning—2 innovative strategies that were the pillars of the Faculty of Health Sciences when it was founded in 1974. Their research groups were organized by multidisciplinary themes, uncluttered by departmental boundaries, which was a model that provided opportunities for a focused research development but in a broader, very informative, and educational context.

While I was at McMaster, the GI research program received a major boost with the creation of their Intesti-

nal Disease Research Unit in 1985 that was inspired by the type of leadership that attracts trainees and faculty recruits. This research program was founded on the vision of Richard Hunt, John Bienenstock, and Ed Daniels. The membership in this research group came from multiple departments, but most investigators were housed in the same area, representing basic, translational, and clinical research in what, at the time, was defined largely by interests in immunophysiology in the GI tract, which examined mucosal and neuromuscular function in health and disease states with a focus on inflammation. The initial director was Steve Collins. The closest mentors to me were Richard, John, and Steve, all of whom had productive research careers and successfully advanced up the academic ladder as division chiefs, chairs, and deans, while remaining clinically active in Richard and Steve’s case. Thus, the notion of contributing at a high level to the mission in any possible way (ie, the triple threat) was instilled by example. Indeed, example is an essential aspect of mentoring.

Through many thoughtful conversations with Richard, John, and Steve, I was guided to do my research training with Mary Perdue studying the immunophysiology of adverse reactions to food, which began during my GI fellowship. Part of the environment at McMaster that encouraged fellows to consider careers in research was their innovative Clinical Scholar Program which provided time-protected research training for 2–3 years after completing clinical training. All of us participating in this program learned how to juggle clinical and research roles from the beginning, but with significant time protection, which in my case, was also supported by a Canadian Foundation for Ileitis & Colitis grant (which is one reason I emphasize to my trainees the importance of applying for grants, which provides benefits at a variety of levels). Not every environment has that, and perhaps even fewer in the current funding environment. This opportunity allowed me time for training with 2 maternity leaves and to develop new skills when I spent some time working with Phil Sherman at Sick Children’s Hospital at the University of Toronto, an experience that led me to extend my training on immune–epithelial interac-

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tions to understanding gastric mucosal responses to infection with *Helicobacter pylori*. Importantly, I was able to combine these experiences to define my own research niche that complemented, rather than overlapped with, the research programs of my mentors.

At the end of this training, I joined the faculty at McMaster as an assistant professor, but my husband and I were soon faced with a common challenge for professional couples—finding 2 jobs that both partners were enthusiastic about. By 1990, we were being recruited by the University of Texas Medical Branch in Galveston (UTMB). However, leaving an environment that had been so fulfilling, both professionally and personally, was not an easy step. I cannot thank Richard enough for letting me know that, although they would love me to stay, my leaving and succeeding professionally would bring great distinction to McMaster's training programs—a lofty challenge—but the “permission” made it easier to break those ties and take on a new and completely independent career at UTMB.

UTMB enjoyed a diverse research community in microbiology, immunology, epithelial cell biology/physiology, GI cancer, and oxidative stress—and the latter area eventually became my own research focus. However, the most significant positive factor for me was the opportunity to work with and be mentored by Don Powell. Anyone who knows Don is aware of his boundless enthusiasm for gastroenterology and his selfless commitment for seeing new faculty find their passion and succeed. Don was recognized his past autumn for his outstanding leadership and contributions to gastroenterology during his many years at the University of North Carolina and >20 years at UTMB. Many GI faculty can identify Don as having had a key role in encouraging them in their research careers. His involvement as a role model and mentor for me were nothing short of remarkable. Don had “done it all” and met with me frequently in a somewhat unstructured way to set goals, discuss choices, and assess development. One of his great attributes was his enthusiasm for working beyond ones' institution and he made a very compelling argument for me to get interested in enhancing my own development through participation with the AGA.

As one reaches an increasing degree of independence, mentorship—in its broadest definition—comes from different places. Because female gastroenterologists were less common earlier in my career, there were opportunities for me to contribute to committees as a woman in GI. Through the AGA, I was able to work on several committees in what became my home away from home for professional development. This involvement introduced me to many outstanding leaders and mentors including David Peura, who was always a person with great experience and wisdom who willingly provided me

with suggestions and advice throughout our 10 years at the University of Virginia (UVA) and even now when I ask. Although there are too many colleagues associated with the AGA who have shaped my interests and hence, my career in gastroenterology, to acknowledge individually I have to mention a few contemporaries, including Loren Laine, Gail Hecht, Rick Peek, Kim Barrett, and John Carethers, each of whom have discussed their perspectives on academics, gastroenterology, and mentorship with me over many years of our friendships. These interactions and many others involving various committees of the AGA, National Institutes of Health, and the American Board of Internal Medicine, heightened my appreciation for positive role models such as Dan Podolsky, Gene Chang, Rick Boland, and Fred Gorelick, who have helped develop my skills as a leader and as a mentor.

I have had significant opportunities to mentor fellows and residents in my career as the GI fellowship training director at UTMB, a member of the Committee on Residency Education at UVA and director of the T32 GI training grants during the last few years at UVA and now at the University of California San Diego. I also enjoyed the role of director of faculty development within the GI Division at UVA and I continue to function as a career mentor of junior faculty at UVA. My involvement in meetings that focus on mentoring young GI faculty and fellows, the AGA Academic Skills Workshops and the North American Conference for GI Fellows (NACGF), as well as the AGA Annual Womens' Committee lunch at Digestive Disease Week (DDW) have been particularly gratifying. As an attendee of a very early NACGF in 1989, where I heard Jerry Waye give a humorous but important talk on “how to give a talk,” it is a pleasure to be able to return the favor of mentoring to a new generation of gastroenterologists. Being available to provide advice and follow-up after an initial contact with a trainee or junior faculty at such events is part of the important mentoring network which extends beyond the mentee's own institution.

Role models are especially important in mentoring. Gail Hecht has had a special role in my career as a highly accomplished woman in gastroenterology. She and several other female colleagues have made it a point to meet every year at DDW since the mid-1990s. Although based on our mutual friendship, we have used these opportunities to share the experiences and choices in our lives as we juggled careers with spouses and/or children. This group of women, who have all gone on to significant career successes, serves as a pillar of support to each other. I have noticed many other colleagues, male and female, in practice or academics, gravitate to colleagues in much the same way, with the larger group having contributed to the decisions all professionals face throughout their careers and personal lives. One lesson I have

learned from our group is that your colleagues can be supportive in your personal and professional lives, regardless of your age and experience. Anyone wishing to enrich their mentorship can create this aspect of their environment themselves and tap into expertise and wisdom that you may not find in your own institution. Sometimes it is easier to make the time for these discussions when we are not at our own institutions when research, teaching, clinical responsibilities, and children's sports and activities fill our days.

We all hear about the "global village" we live in and our "global economy," but this geographic scope relates to gastroenterology as well. There are outstanding opportunities to meet colleagues, collaborators, and friends at any number of international meetings. With the creation of the global economy, there are now excellent research training experiences available in Europe and Asia. These opportunities can only expand the pool of meritorious research mentorships and intriguing areas for investigation. For the past 5 years, I have participated in an annual interaction of young investigators that takes place at both DDW and the United European Gastroenterology Week (UEGW) meetings. Recipients of the AGA Research Scholar Awards or Rising Star Awards from the UEG present their research providing an exchange of new knowledge and ideas. I was fortunate to receive an AGA Research Scholar Award as a junior faculty at UTMB,

which supported my research career; it is gratifying to see this program continue thanks to the contributions of AGA members and the AGA Research Foundation. I also participate in an annual mentoring program for Japanese trainees and junior faculty, the Japan-US Collaboration Conference in Gastroenterology, started by Toshifumi Hibi and Gene Chang some years ago now. With contributions from many US colleagues, the attendees have enjoyed seminars on presentation, scientific process, writing, and professional development. This is another example of how creating an appropriate environment can enhance mentorship and professional development. I also believe one can find thoughtful mentorship at many meetings. If you go to a national or international meeting, my advice to younger colleagues is to check the program and attend sessions where they recognize "life-long" career contributions, because they often feature comments of inspiration and insight that all of us can relate to. These are often fascinating personal stories, but they are also mentoring opportunities.

After a certain time, perhaps more years than we like to acknowledge, we appreciate how our colleagues have supported us and how we can pass some of this experience on to the next generation. I have never had the pleasure of being at an institution or program led by Tachi Yamada, but I have enjoyed meeting him and listening to his scientific work and thoughts and perspectives on

**Table 1.** Personal Attributes and Goals That I Strived for Which Have Shaped My Career

Recommendations for mentees	
1	Personal life is the most important part of our careers; make time for your family and yourself. Look after your physical and mental health.
2	Participate in committees or other activities at your own institution or beyond that offer the opportunity to learn new skills, acquire knowledge, meet new people, and/or advance what you feel to be an important or worthy mission. However, avoid too many extracurricular professional activities that do not meet these goals or detract from your main career mission.
3	Become an expert in a focused area of your clinical and/or research activities. Write a comprehensive review article that can serve as the backbone of your research and facilitates the development of your expertise in the field.
4	Expand your sphere of potential colleagues and mentors by making sure you have the opportunity to meet visiting professors and attend their presentations when they visit your institution. Similarly, introduce yourself to individuals you would like to know who work in relevant fields during meetings or other settings.
5	Apply for appropriate research grants, travel scholarships, and other means to augment funds for research and attending meetings. Remember, if you don't apply you will never get the award.
6	Identify individuals who can serve as your mentors in several different areas, career mentors, research mentors and other forms of support. Create your own mentoring team if you don't have one using strategies described in item 4 (above).
Recommendations for mentors	
1	Invite junior colleagues to co-author important invited review articles, review manuscripts, and to join other scholarly activities that will help to develop their emerging area of expertise.
2	Be available for those you mentor and reach out to help them succeed through one-on-one meetings, speaking by phone, answering emails, and reviewing their grant applications, letters, CVs, abstracts, and manuscripts.
3	Remember that your efforts to advance your own goals and career aspirations should also augment the successes of the greater group whether it is your lab group, division colleagues, patients, or institution.
4	Promote your colleagues by recommending them for service on meaningful committees, speaking opportunities, and other activities that will enhance and advance their careers.

medicine and science. In his article on mentoring in a previous issue<sup>2</sup> (which I encourage everyone to read), he noted several of the most important aspects of mentoring. Although we all strive to develop our careers, he notes that balancing our professional and personal lives is absolutely essential and good mentorship is sensitive to this duality. I could not agree more. Every personal career trajectory requires one to make choices in the type or number of professional activities. Often, it seems that we are obliged to “give up” an opportunity because it competes too much with our families or other interests, but our personal life is the most important part of our careers. In my case, my husband Peter Ernst, also in an academic career related to digestive diseases, and I had an agreement that neither of us would advance in our career at the expense of the other; so far, we have made this work. Second, at a certain point, we are not judged so much by our own personal accomplishments, but by the success of the people we have helped in their career development. In my current institution, I have been delighted to have Bill Sandborn as a division chief whose success is well known; however, much of his current efforts are directed to supporting the needs and aspirations of our division faculty so they can all succeed. By the example of many of those who have mentored me, I have found opportunities through the AGA, the American College of Gastroenterology, and other groups to pass on my own experiences that, I hope, have helped my younger colleagues. I have to confess that I have been particularly interested in the success of women in GI as

someone who has been connected to some of the unique situations faced by professional women.

Mentorship is a circle; we seek it out, rely on it throughout our careers, and then we can share our experiences with our younger colleagues. This is the culture and environment you should seek out during training and your first jobs. This environment will include colleagues at your own institution, but it should also evolve to embrace the wealth of talent and experience that is available throughout the broader GI community. Develop a path that is good for you, find a mentor, get involved in associations and meetings, and pass it on. I hope you have the same satisfaction I have enjoyed with my family, work, and colleagues. In closing, I leave you with my top 10 recommendations that I found have helped me personally, and hope these might also be helpful to others (Table 1). The latter points apply to later stages of ones' career, when mentoring others becomes more important.

## References

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## Conflicts of interest

The author discloses no conflicts.