Finding Success in Group Mentorship

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Frustrated by a Lack of Support

The story of the Africa Mental Health Foundation (AMHF) PhD Colloquium began in 2006 with a group of six friends pursuing Master’s degrees in Clinical Psychology at the University of Nairobi, and the casual invitation of one friend to the other to “come hear my story.” Overwhelmed by the task of putting together their research proposal and frustrated by the lack of support from University supervisors, the group of six decided to help one another by discussing their ideas in informal meetings in class. After completing the Master’s program and proceeding to the PhD level, the six were faced with the even more overwhelming assignment of completing their doctorate proposal under the same frustrating conditions and so they decided to continue with these informal discussions.

In time, the group grew to 10 students, the majority of whom were from the University of Nairobi, Department of Psychiatry. The classroom could no longer accommodate the sessions due to frequent interruptions by lectures scheduled to take place in the same room. They then moved to the school cafeteria where, as a precondition to use the facilities, they each had to purchase a food item. In time though, even this environment turned hostile to their forum. The proprietor felt cheated because they only purchased simple food items that were affordable on a student’s budget, like tea and coffee, yet stayed on for hours, taking up space that would have otherwise been occupied by higher spending customers.

Thankfully, Prof. David Ndetei, a Professor of Psychiatry at the University of Nairobi took notice of their situation and invited them to use his office at the Africa Mental Health Foundation (AMHF) premises for their meetings. Scheduling conflicts were common and often they displaced him to hold the sessions. Eventually he had no choice but to sit in. After crashing a few sessions, Prof. Ndetei’s interest was sparked and he saw an opportunity to offer his time and share his knowledge with the group.

Professor David Ndetei Talks about His Experience as a Mentee and Meeting Student Needs

“I had a wonderful experience with my supervisors over the time I spent pursuing a Doctorate in Psychiatry in the UK. They always made themselves available to review my
work, readily offered their advice and one even went as far as offering to cater for my logistical expenses. I was so disappointed on returning to Kenya when I realized that students here did not receive much, if any support at all, from their supervisors. It was nearly impossible for some students to have meaningful contact with their supervisors and the few who did only got their work reviewed often with delays in time that resulted in an overall delay in completing the program. Since then, I had wondered how we could make mentorship a meaningful experience for students of mental health at the University and in the country.

When I attended the sessions of the group in my office it occurred to me that this was the opportunity I had been waiting for all along. The discussions were lively and enlightening to the students and to me as well. There was a free flow of ideas and suggestions from the students themselves that enriched their work and helped those who were stuck move on. It was then that I realized that in the current situation, where few mentors are willing to give their time and support to students, more students would benefit if mentorship was done in a group setting rather than the traditional one-on-one setup between the mentor and the mentee. In a group, one mentor is available to multiple students at the same time, thus saving on time and the mentor does not feel overwhelmed.

Peer-to-peer learning among mentees by critiquing each other’s work during the sessions would extend further the benefits of the program as it enriches the work produced by evaluation from multiple perspectives. Those who benefited from the program as mentees could also mentor others in future thus building capacity in mental health research mentorship in the country. By building their skills in research, the beneficiaries of the program could in future implement their ideas on a wider scale and participate in funded mental health research.

**Mentees Take the Lead**

Although, Professor Ndetei support has been critical to the success of the colloquium, the initiative has always come from the students, with a number from outside the University of Nairobi requesting to join. The students made arrangements about when to meet, often a three-hour session held once a week or at least twice a month. AMHF offered logistical support such as handling correspondence between members, and providing equipment such as projectors and writing boards for members to use while making their presentations. All members of the colloquium were also free to use the facilities at AMHF including the students centre, access to high-speed internet as well as books, papers and journals from the AMHF library.

The meetings were not formally structured, but the students prepared a schedule ensuring each of them had an opportunity to present their work to the rest of the group. Some meetings would include the mentor while others were held by the students on their own to help each other before presenting their work to the entire group and the mentor. The separate meetings provided the opportunity for peer-to-peer mentorship that complemented the overall group mentorship.
The individual/s presenting their proposals on a particular day covered the cost of the space where the session was held (at this point it had been decided to rent a space for the meetings) and provided refreshments. After each presentation the rest in the group, including the mentor, offered their input, which the individual was expected to incorporate in her/his work. As a courtesy to all members of the group, attendance of sessions was mandatory. If a member missed three sessions then an ultimatum was presented to him/her; either to resume active participation in the group or to end their membership.

Challenges

In its initial stages, the program faced various challenges such as lack of serious commitment to the process by some members. Some were disheartened when their work was critiqued and left the group. Others initially joined the group will ill motive, seeking to steal other member’s ideas that they later presented as their own. Members also had other commitments from work and the PhD program that left little time to work on their proposal as the program demanded.

The program further suffered from the negative attitude of other university supervisors who believed that group mentorship watered down the quality of work produced by the mentees. Most felt that peers could not offer any meaningful input, being inadequately qualified because they were all in the same level. In addition, many felt that the group was usurping their role as mentors and undermining their position as supervisor. They were angry that the group even critiqued the input and feedback they gave their mentees and felt that this was a personal attack on their capabilities and status.

This was not the case, and many of the supervisors were invited to join the group as mentors but declined. The first group who were members of the colloquium produced such exceptional work that the standard they set is yet to be beaten. In fact, the MSc Clinical Psychology program even overtook the MSc Medicine in Psychiatry at the university in terms of quality of proposals produced. Despite all this, the university supervisors remain adamant in their opposition to the program to this day.

It has been difficult to fully address the negative attitude and criticism from university supervisors. As a result of their ongoing fight against the program, fewer students from the University’s Department of Psychiatry are interested in participating; many of them fear that joining the program will earn them a negative review from their University supervisors. In turn the number of students who graduate from the University’s PhD program has fallen; receiving little help, most are unable to complete their proposals.

To deal with some of the other challenges, for example those joining the group with ill motive, admission to the program was largely reserved for students enrolled in the Department of Psychiatry at the University of Nairobi. Interested individuals were required to present proof of registration to the University. The colloquium has since expanded to include other students from both local and international universities who are interested in mental health research and those working in collaboration with AMHF. Those who join the
program must also make a commitment to complete their proposal within two and a half years. This ensures that members take the process seriously.

Benefits

“The combination of heads, effort and muscle enables you to finish your work in record time thus saving time and money”, says Dr. Victoria Mutiso, one of the first beneficiaries of the program. “Putting together the proposal is not easy but in the group, you receive encouragement from others who are in the same situation and together you encourage each other to move forward.”

By providing an environment where they can focus on their research while learning from each other and from senior faculty, participants develop an open mind, and are able to accommodate different views and perspectives. This adds to their knowledge and the development of a scientifically attuned mind; a necessary predisposition for research work.

The program further fills the gap in mentorship as mentors from outside the universities represented can participate. Beneficiaries of the program can also pay it forward by participating as mentors in future.

The program also has a social aspect where participants make new friends and arrange social functions. Many who participated in the first group are still friends’ and continue to support each other in their professional and personal development.

On to the Future

In the two years since the creation of the colloquium, four of the original 10 members have so far graduated with their doctorate degrees. Two of them are giving back to the program by mentoring others. There are four new members.

We hope that the program can grow even further to incorporate genuine students from other local (both public and private) and international universities in collaboration with their university appointed supervisors. Already, AMHF provides opportunities for support for both local and international students from various universities interested in mental health research in Kenya. Those who join under these support opportunities are also welcome to join the colloquium. In this way, we can develop an exchange program for mentors and mentees from developing and developed countries. Students from developed countries can benefit from mentors from a developing country and vice versa. The same would also apply for mentors in that we would partner mentors from a developing country with mentors from a developed country to help them learn mentorship and support each other. Mentors from developed countries will be selected from our collaborators.

Despite some growing pains, such as losing members and the lack of support from university supervisors, the program has had immense benefits for participants enabling them to complete their studies in record time and produce quality work. As mentors, it has
been a rewarding experience and a joy to have the satisfaction that comes from giving. It is also humbling to realize the potential and capacity in others and to learn from them.

David Ndetei is the founding Director of the Africa Mental Health Foundation and Victoria Mutiso is Director of Administration and Finance while also serving as a Research Fellow. You can learn more about AMHF on their website: http://www.africamentalhealthfoundation.org/