Navigating Medical School: Longitudinal near-peer mentoring program and commitment to holistic development of the training physician

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Problem Statement

While students navigate medical school curricula, formation of a strong professional identity requires guidance during the transition from academic to professional training

Program Objective

The Navigating Medical School (NMS) Program was developed to provide near-peer mentoring that standardizes and guide students in their professional identity formation.

Program Description

NMS is a student-led, faculty-supported, peer-assisted program that equips students with a mentoring team to guide their academic, career, personal, and professional development. Near-peers are upperclass students (MS3 & MS4) who guide underclass students (MS1 & MS2) through three complementary programs: (1) a Seminar Series addressing career development topics at critical timepoints, (2) a Guides Program providing structured near-peer mentoring, and (3) a Networking effort increasing student connection through virtual Communities of Practice. Impact and student satisfaction is assessed by surveys while program usage is analyzed via attendance tracking.

Evaluation/Assessment

Since origination, at least 448 students have participated in one NMS event. The Seminar Program holds 10 seminars annually. The seminar curriculum includes academic guidance (e.g. study strategies, Step 1 planning), career guidance (e.g. residency selection), personal guidance (e.g. wellness), and professional development (e.g. transitioning to wards). In the past year, average seminar attendance has been 51 underclass students and 6 upperclass

panelists. The Guides program has enrolled four annual guidee-guide cohorts annually: 61 underclass guidees in year 1, 73 in year 2, 78 in year 3, and 89 currently. Participation has steadily risen with 45% overall growth and 105 total guidees-guide grouped to date. Program sustainability has been high with 86% of MS1s originally enrolled as guidees subsequently participating as MS3 guides. Overall, satisfaction with NMS is high. Student feedback indicates success in developing effective study habits, identifying research opportunities, and improving board exam strategies. Open discussion of their strengths and weaknesses has allowed students to understand their own professional identity and tailor career choices.

Conclusions

NMS is a feasible model for student-led, faculty-supported programming to strengthen professional identity formation. Voluntary student participation has been high. Significant involvement of students initially enrolled as guidees subsequently participating as MS3 guides reflects longitudinal sustainability of the program. NMS fosters a "pay-it-forward" culture and promotes medical student professional development.