Twitter as a Tool: Finding Mentorship as a Medical Trainee

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Background

A fundamental part of both professional and personal development for any medical trainee is finding a faculty mentor.¹ At both the preclinical and clinical stages of medical education, a mentor can provide a trainee with multiple types of career advice, including tips on the culture of academic medicine and how to create and find research opportunities.² However, merely having a mentor is not enough to truly launch a prosperous career. Rather, a successful mentor-mentee relationship must have chemistry in both professional interests and personal interactions. Much like any other successful relationship,

finding this match can be difficult. Current approaches to this process of finding a mentor include formal, institution-assigned mentors or self-driven and organic relationships. For the latter, mentees often find mentors whom they have interacted with while on service or whom they have met through a mutual contact.

Given the importance of the mentor-mentee relationship, several papers have been written emphasizing the behavioral dynamics that lend to a fruitful relationship,^{3,4} but the formal literature on how to practically find a mentor is limited. Finding a mentor has always posed a significant challenge for medical trainees.

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Traditional constraints include time, which has been cited as the single most important barrier to mentorship²; geographic restrictions due to being limited to mentors at one's home institution²; and limited opportunities for professional interaction with potential mentors.

Using Twitter to Develop a Mentor-Mentee Relationship

Twitter, a social networking and microblogging platform where users can post and interact with short messages called "tweets," has grown tremendously in general use since its inception in 2006; in 2017, an average of 500 million tweets were posted per day. Twitter is a powerful social forum that transcends geography and time and provides a level field where mentees can more easily find mentors. It is an impressive tool for information dissemination, social support, and public debate that can be a boon in finding and cultivating a mentor-mentee relationship.

Because Twitter allows people to share information in individually voiced and concisely crafted messages, participants can build a body of work, much like a CV, supplemented by their own narration. Already, social media has proven an effective tool for networking among physicians.⁷ Twitter, specifically, is well documented and studied as a successful tool for disseminating research to aid in staying current on literature while allowing community appraisal of new work.⁸ Numerous physicians have recognized and accepted the benefits of Twitter as a method for collaborating and receiving feedback to support their own careers.⁹ Social media (Twitter in particular) in medical education has improved professional society outreach and enhanced connections and collective problem solving.^{5,6} As a result, trainees in the modern era now have a greater repertoire to assist in overcoming the challenges of finding a mentor and to cultivate significant and meaningful relationships with potential mentors.

Overcoming Geography

Mentees may struggle to find mentors at their local institutions due to disparities in professional

interests or mismatches in personality cohesiveness. Twitter removes this constraint and enables medical trainees to overcome geographic restrictions by allowing them to communicate with faculty members across the country or world who have similar interests. While there is no substitute for face-to-face interaction, Twitter can serve as a supplemental resource by allowing trainees to communicate more widely within their network at their home institutions or through prompt face-to-face interactions with potential mentors at different institutions.

Tweeting Through Time

One of Twitter's strengths is time; it facilitates communication between individuals in a fraction of the time it would take to otherwise meet in person. Additionally, it can lead to introductions through other social-media platforms, such as email, LinkedIn, or Doximity. Face-to-face interactions are often brief and transient and don't provide an opportunity for an expanded dialogue. Twitter enables trainees to have multiple conversations over an expanded time. Live-tweeting (posting real-time reactions to current events) has grown in popularity in both academic and non-academic domains, with professional conferences and media events alike utilizing this convenient communication method. This ability to respond in real time and see potential mentor's tweets in real time, empowers medical trainees to stay abreast of medical knowledge and their mentors' work.

Leveling the Field

As a platform for brief communications with minimal use restrictions, Twitter also allows for informal interaction between medical trainees and potential mentors while removing the traditional hierarchical setting of the standard medical dynamic. Whether due to inhibitions on the part of the trainee or the mentor's lack of availability to meet with every potential mentee, it can be difficult for a trainee to approach mentors in the medical hierarchy. With the help of Twitter, trainees can cultivate

a network, build recognition for themselves, pose research questions and clinical inquiries using an egalitarian platform. Twitter's nontraditional communication format opens doors to mentee-mentor relationships that otherwise would not be possible.

Guiding Principles of Social Media Use for Mentees

With the changing dynamics brought to academic medicine by social media, it benefits medical trainees to take advantage of social media in a professional domain. They can form relationships and engage in dialogues with potential mentors without geographic limitations over an extended span of time. However, medical education largely ignores formal instruction of social media as a tool for fostering mentor-mentee relationships. Below, we enumerate 3 simple, guiding principles for social media use by trainees: *Follow*, *Participate*, and *Establish*.

Follow: Social media allows trainees to develop a diverse network of both strong and loose ties. Trainees should follow physicians whom they already know, as well as physicians at various institutions and career stages who have diverse interests in clinical medicine and research. Additionally, by following leading journals and professional societies trainees can demonstrate their interests while staying up to date on breakthroughs in their fields.

Participate: The ease of participation and freedom of dialogue are two social media benefits trainees can take advantage of for participating in academic discussions with those at more advanced stages of their training. Trainees should maintain active dialogue in online communities as they would in the academic setting, including asking thoughtful questions, commenting on questions posed by the community, and bringing attention to relevant work by using "retweet" or "like" features.

Establish: Through the digital world, trainees can establish online identities that are reflective of their own personalities and demonstrate their

ambitions. Cultivating an identity is accomplished by highlighting academic topics of interest to them, making their own work public, and participating in nonacademic dialogues that reflect their personal interests. Furthermore, due to the informal nature of social media, trainees can build a name for themselves prior to publishing their first formal journal articles or similar works.

Drawbacks of Social Media

Following the 3 guiding principles can enable a trainee to gauge how well his or her interests align with potential mentors, to assess individual propensity for success, and to determine communication effectiveness with faculty. In addition to actively engaging with potential mentors on social media, trainees must be wary of the drawbacks of social media and carefully avoid behaviors that can tarnish their reputations. Professionalism can be lost quickly on social-media platforms by using inappropriate language, sharing offensive material, or simply being tagged in an unwanted post. Furthermore, trainees, along with all physicians, must be aware that social media is a public forum in which they can be judged and evaluated by anybody, including patients. When using Twitter or other social media outlets for the purpose of finding a mentor, mentees should be cautious and remember that not all physicians use social media, so solely relying on it to develop and cultivate relationships may restrict potential relationships. Finally, as a public forum, the quality and accuracy of information on Twitter, as well as other platforms, is not necessarily validated, so trainees should remember to use good judgement in evaluating posts.

Conclusion

Social media is a domain that has drastically under-recognized potential as a significant medium to form mentee-mentor relationships. While Twitter is being used increasingly in other fields as a networking tool and research is growing about the use of social media in medicine, little guidance is

available on successfully utilizing Twitter for professional networking within academics. By adhering to the simple principles enumerated in this piece, mentees can maximize the professional networking capacity of Twitter. Through increased and more focus use, Twitter and other social-media platforms will transform the way mentees and mentors seek out one another and cultivate relationships. By leveraging Twitter, mentees can find mentors who have similar interests on the other side of the world, communicate with them any time of the day, continue conversations over time, and approach mentors who might otherwise be inaccessible due to hierarchies inherent in academia.

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