



Luck or Destiny: How My Accidental Mentor Took Me From Impostor to Scholar

Carrie Bernard, MD, MPH

(Fam Med. 2018;50(8):627-8.)

doi: 10.22454/FamMed.2018.917326

I was shocked when I was offered the position of associate program director. Even with years of teaching experience, an MPH, and one publication in press, my impostor genes plagued me. After all, I was not your typical academic. I worked as a community-based family doctor not affiliated with a teaching hospital. And yet the selection committee chose me. Despite having the courage to apply, I began to wonder if somehow I had fooled them. Maybe I oversold myself and would never be able to measure up.

The impostor phenomenon was originally described in relation to high achieving women who believed they were less competent and intelligent than others perceived them to be.¹ Such feelings of being found out affected me throughout my time as a medical learner, although I knew this was common among medical trainees.² I had hoped to overcome these fears through ongoing hard work, experience, and self-reflection. I thought I had made great progress after 14 years of clinical practice, leadership work, and teaching. Unfortunately, in the academic world, I suffered from a resurgence of my impostor syndrome symptoms! Despite my fears, I took a deep breath, signed the contract, and hoped for

the best. Still, those nasty impostor thoughts poked their way through once in a while. I worked hard to keep them at bay.

Six months into my new job, something terrifying happened. My program director couldn't attend an upcoming education scholarship retreat, and I was asked to prepare a presentation in his place. I froze. One look at the list of invitees brought back my old friends "the impostor brigade." I thought: "Those people are real scholars." "I don't belong there." "I am sure they have many grants—I only have a few." But I had no choice—I had to go. So I asked some questions about scholarship in postgrad and created my presentation.

The day of the retreat, my academic career took an unexpected turn. Was it just luck (for me) that my program director was away? Or was it destiny that I was to meet my accidental mentor at a meeting that I was not originally supposed to attend? I may never know.

During the retreat, one major theme was emphasized: curriculum needs to be developed in an evidence-informed, scholarly way. I had recently been tasked to create a new ethics curriculum and although this idea made perfect sense to me, I

realized that I didn't actually know how to do this! This insight seemed to confirm those nasty voices: obviously I was in way over my head!

But my impostor voices were slowly replaced by an ever growing curiosity. I began to wonder how I could relate all that I knew about evidence-based medicine to creating an evidence-informed curriculum. I was intrigued. Once I made room for my curiosity, I began to realize that others at the retreat didn't seem to have all of the answers to absolutely everything! People were asking really important and interesting questions. And others were stepping in with some fabulous ideas. I noticed that I was in a room that felt like a community; a community of scholars, intent on learning together. This realization gave me the confidence to approach one senior faculty member who, whether she intended to or not, became my mentor and has been ever since.

Much has been written about the mentor-mentee dyad.³ Articles explain what is expected from the relationship.⁴ Interestingly, my mentor and I did not consult any of these resources. We didn't even discuss

From the Department of Family and Community Medicine, University of Toronto.

mentorship. I say that she became my “accidental mentor” because on that fateful day I had no idea that meeting her would mark the beginning of an incredible journey full of challenges, learning, disappointments, and triumphs, all of which paved the road for me from impostor to scholar.

After the retreat I booked an appointment with her to discuss my ideas. Slowly, over the next 3 years she met with me, provided input, and let me struggle here and there as I navigated my role as curriculum lead in the department and worked to create an evidence-informed ethics curriculum. She was there to help me navigate the politics of our department, to provide me with feedback following team meetings, and to ask critical questions at what seemed to be the perfect moments. At times it was a bit scary. If I said that those impostor voices were banished for good I would be lying. But her encouragement and the fact that she let me sort out the most difficult issues on my own (while cheering in the background) helped me to really believe that I was the right person for the job and that I could most certainly excel.

When our curriculum was almost complete, my accidental mentor reminded me that we still had to incorporate a rigorous evaluation of our work. To do so, some additional academic matchmaking was needed. I

had no idea that matchmaking was part of a mentor’s role (accidental or otherwise), but introducing me to an education scientist with expertise in assessment techniques proved to be a match made in heaven. Three years after my impostor brigade taunted me about the upcoming retreat, our team, with me as principal investigator, received a large grant to evaluate our curriculum.

We are now well into the fifth month of our project. I feel confident that I can lead our team and mentor junior members. I am also ever more curious and committed to my scholarship journey. I still look forward to when the phone rings and my mentor asks me if I want to check in. Although luck may have played a role in the circumstances of our meeting, it was most certainly her commitment to mentorship that took me on the journey from impostor to scholar. I will be forever grateful for that commitment. I plan to follow in her footsteps as a mentor for others as we continue to learn and grow together.

ACKNOWLEDGMENTS: This journey and article would not have been possible without the mentorship and guidance of Dr Risa Freeman, Vice Chair of Education, and Director of the Office of Education Scholarship at the University of Toronto. In addition, the helpful critique and advice from the anonymous reviewers and junior editor provided the extra mentorship which helped me take this article to publication. The ongoing scholarly work would not have been possible without the support of the Physicians’ Services Incorporated Foundation.

Financial Support: The scholarly project referred to in this narrative was supported by a grant from Physicians’ Services Incorporated.

CORRESPONDENCE: Address correspondence to Dr Bernard, 500 University Avenue, 5th floor, Toronto, ON M5G 1V7, Canada. 416-457-9004. Fax: 905-455-5498. carrie.bernard@utoronto.ca.

References

1. Clance P, Imes S. The impostor phenomenon in high achieving women: dynamics and therapeutic intervention. *Psychotherapy Theory, Research, & Practice*. 1978;15(2):1-8.
2. Oriol K, Plane MB, Mundt M. Family medicine residents and the impostor phenomenon. *Fam Med*. 2004;36(4):248-252.
3. Straus SE, Johnson MO, Marquez C, Feldman MD. Characteristics of successful and failed mentoring relationships: a qualitative study across two academic health centers. *Acad Med*. 2013;88(1):82-89.
4. Zerzan JT, Hess R, Schur E, Phillips RS, Rigotti N. Making the most of mentors: a guide for mentees. *Acad Med*. 2009;84(1):140-144.