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Advancing academic careers through formal professional mentorship: The Research Scholars Mentorship Program (RSMP)

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Keywords

mentorship; mentorship program; professional organization; scholarship; productivity

Acknowledgements/Disclaimers/Disclosures

The authors would like to thank the American Academy of Health Behavior for supporting this mentorship initiative to enhance professional development among its members. The authors also recognize the dedication of the past and current Research Scholars Mentorship Program (RSMP) Directors and Cohort members, whose productivity and commitment to health behavior research inspires the field. The authors also thank the home institutions of the Cohort members, which value career development and the scholarship of their employees. Lastly, the authors acknowledge and thank the National Institute for Minority Health and Health Disparities for supporting the inaugural Cohort as part of a R13 Conference Planning Grant (NIH, 1 R13 MD005702-01), and the W.K. Kellogg Foundation's Health Scholars Program for providing templates and assisting with recruiting an initial Cohort of post-doctoral scholars to the RSMP. More information about the RSMP can be found at http://www.aahb.org/Research_Scholars.

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Advancing Academic Careers through Formal Professional Mentorship: The Research Scholars Mentorship Program (RSMP)

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Abstract

Mentorship is an essential component of professional development for young and emerging scholars. In partnership with the Kellogg Health Scholars Program, the American Academy of Health Behavior (AAHB) developed the 12-month Research Scholars Mentorship Program (RSMP) as a mechanism to facilitate high-quality mentorship interactions among junior and seasoned investigators within the Academy. This article provides a rationale, history, and description of the RSMP, as well as the collective scholarly achievements of the Cohorts and future directions. To date, 44 Pairs have initiated or completed the program. Products written and submitted by the Pairs during the 12-month mentorship period have included grants ($n = 21$), peer-reviewed manuscripts ($n = 64$), and book chapters ($n = 2$). Additionally, Pairs have collaborated to initiate new studies ($n = 10$) and develop new courses ($n = 1$). AAHB's commitment to mentorship and professional development fueled the development of the RSMP to foster inclusive scholarship, expand membership, and promote productivity. The 12-month RSMP is a model for formal mentorship within professional organizations in that it facilitates Mentee-Mentor Pairs to enhance their professional and research trajectories through the execution of processes and development of products.

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American Academy of Health Behavior

The American Academy of Health Behavior (AAHB) was established in the spring of 1997 through the efforts of Dr. Elbert Glover and 32 additional founding behavioral scientists (McDermott & Glover, 2010). The Academy was one of the first professional organizations designed to elevate the research contributions of health educators and social scientists (in the fields of psychology, behavioral medicine, etc.) in the larger context of apparent de-valuation of the health professions within university settings. The mission of AAHB was to serve as the “research home” for health behavior researchers whose primary commitment was to research excellence and the application of research-to-practice with the ultimate goal of improving public health.

Since the incorporation of its Board of Directors, membership in AAHB was inclusive of established researchers in the field, doctoral students, and early stage investigators who had a record of peer-reviewed empirical publications (i.e., affiliate members). The various “levels” of membership created fertile ground for the eventual establishment of a mentoring framework within AAHB whereby seasoned members could guide and contribute to the academic success of their more junior counterparts (McDermott & Glover, 2010), while actively engaging and

retaining them in the organization. Moreover, because AAHB was intentionally designed to be a relatively small professional society, it was well placed to promote professional intimacy and collaboration amongst its members and to maintain a high caliber of science among its membership. The size of the membership nurtured small and intimate annual meetings where senior and junior members could come together to discuss the state of the science and future directions in the field (McDermott & Glover, 2010).

AAHB held its first conference in Santa Fe, New Mexico, in 1999 and has hosted an annual conference every year since 2001. The annual conference themes focus on emerging priorities and cutting-edge issues in health behavior research (see <https://aahb.org/MeetingPrevious> for more information). Since its start in 1997, AAHB's membership has expanded to its current count of 122 full members, 6 Emeritus, 24 affiliate members, and 36 doctoral student members.

The Value of Mentorship

Over the years, AAHB annual conferences grew to provide several opportunities to promote and recognize excellence among junior scientists within the organization, including: (1) theme-based roundtables that brought senior scientists together with junior scholars for in-depth discussions; (2) mentoring workshops; (3) professional development lunch gatherings led by experts in the field (such as Dr. Larry Green); (4) the creation of an early-stage investigator research award (the Judy K. Black Early Career Research Award); (5) a mid-career mentoring award; and (6) other informal means of mentorship-focused interaction. The Academy's attention to mentorship and professional development has established a pipeline of young, qualified investigators who would eventually grow into AAHB Fellows and substantially contribute to the academic success of their home institutions (ultimately retaining them in academia (Snowden & Hardy, 2013)). Eventually, AAHB's focus on mentorship led to the development of the formal Research Scholars Mentorship Program (RSMP), which is the subject of this article. The RSMP was founded on the known benefits of mentorship to the promotion of academic success (Rubin, 2014), which are worth reviewing briefly prior to describing the program itself.

Mentorship has been defined as a relationship between a junior and seasoned investigator that is designed to provide "resources (but not obligations), opportunities (but not demands), advice (but not orders), and protection" (Sacket, 2001, pp. 94-95). Essentially, mentorship exists when someone with knowledge and experience (the Mentor) conveys this information to someone (the Mentee) for the purpose of the Mentee's development as a professional (Inzer & Crawford, 2005). The benefits of mentorship are many, and can include: (1) developing and establishing a professional identity (Goltz & Smith, 2014), (2) learning new skills and processes to enhance competency and efficiency (van der Weijdgen, Belder, van Arensbergen, & van den Besselaar, 2015); (3) increasing scholarship and scholastic productivity (Muschallik & Pull, 2016); (4) expanding teams and networks for collaboration; (5) reciprocating knowledge exchanges among professionals; and (6) using what is learned to mentor others.

Particularly important for those under-represented in the sciences, mentoring can be accomplished through informal or formal relationship structures (Beech, et al., 2013; Inzer & Crawford, 2005; Johnson & Gandhi, 2015). While both types of mentorship are important, organizations invested in the development of their membership will often develop a formal mentorship program to achieve these goals. There are several known characteristics of effective

organizational mentorship programs (Hanover Research, 2014). These include, but are not limited to: (1) support from organization's administrative leaders; (2) Mentee participation in Mentor identification/assignment; (3) facilitation of the program through formal administrative structure and support (e.g., a coordinator or director, formal documentation milestones); and (4) clarity of relationship targets, goals, and expectations. Other recommendations include that formal mentorship programs have an evaluation plan and a long-term goal of lasting informal mentorship. Formal mentorship programs are also recommended to explicitly connect their missions and activities with the goals and mission of the organization that hosts it (Inzer & Crawford, 2005). With attention to these guidelines and recommendations, the RSMP was formed in 2011 and has remained relevant in meeting the developmental needs of the AAHB membership (see http://www.aahb.org/Research_Scholars for more information).

The Research Scholars Mentorship Program

The 12-month AAHB RSMP was developed as a mechanism to facilitate high-quality mentorship interactions among junior and seasoned investigators within the Academy. It was also developed to be intentional about recruitment of minority scholars to the Academy. Matches are based on research interests, and each Mentee-Mentor Pair works together to develop skills and gain experience in conducting research-related activities. Ultimately, this program was intended to cultivate and nurture the next generation of scholars to promote productive research-driven careers that exude excellence in health behavior research.

The program is largely Mentee-driven, given that the advancement of their careers is its primary focus. To enhance their research career, each Mentee proposes processes and/or products on which to focus over the 12-month period. Examples of academic processes include developing a research trajectory, enhancing one's curriculum vitae, expanding professional networks, forming research teams, navigating the promotion and tenure process, and giving job talks. Examples of academic products that have been the focus of Mentee-Mentor Pairs in the past include grant proposals, publications, and conference abstracts/presentations. Each Mentee works closely with their Mentor to identify and formalize the processes and/or products that will comprise the focus of their work together.

History and Evolution of the RSMP

The RSMP was introduced within AAHB in 2011 via a collaboration with the W. K. Kellogg Health Scholars Program, noting that one of the Board of Director members at the time was an alumnus of the Community Health Scholar Program. This program was a post-doctoral training program that focused on community-based participatory research, health disparities, and/or health policy, with many participants entering into research positions after completing the program and remaining motivated to have continued mentorship as junior scientists. Kellogg Scholars were the inaugural applicants for mentorship, who were linked with AAHB senior members. Most of those Kellogg Scholars self-identified as an underrepresented minority (primarily African American and Latino). Given this foundation, the intention of the program was to train the next generation of research professionals and diversify the Academy membership with regard to health disparities research and the inclusion of scientists from underrepresented groups. The effort was originally funded as part of a larger R13 conference grant for \$44,600 from the National Institutes of Health (NIH) – Center for Minority Health and

Health Disparities (1R13MD005702-01: The Art and Science of Community-based Participatory Research (CBPR): Methods; co-PIs: David W. Seal, PhD & Lisa A. Benz Scott, PhD).

In its inaugural year, there were six Mentee-Mentor Pairs. These Pairs met at the annual conference to log face-to-face mentoring time and continued with long-distance mentoring after the conference. At that time, Mentees were primarily doctoral students and post-doctoral fellows or in their first faculty appointments in tenure-track positions. Each Pair worked on a diverse set of deliverables that were stated in a 12-month mentoring plan. The mentoring plans were submitted to the Mentoring Program Coordinator (an invited position by the AAHB Board) and monitored for completion of milestones, with conference calls involving the Pairs and Mentoring Program Coordinator every few months. Deliverables were designed to fit the Mentee's career stage and result in a research product to advance both the field of inquiry and their career (e.g., submission of an NIH grant, completion of an empirical analysis for publication, preparing for a job talk to land a faculty position). Tasks were uniquely reflective of their needs and aligned with the content expertise of their Mentor.

Following the first Cohort of Mentees, feedback was sought from the participants, and modifications were made to reflect how AAHB could sustain the program without new funds after the grant period ended. After a year of reflection, adaptations were made in that Pairs were both current AAHB members and a reduced conference registration rate (at the student rate for that year) was provided for Mentees who are presenting results of their 12-month Pair at the conference. There was one new Mentee-Mentor Pair in 2013 and there were two new Pairs in 2014. In 2014, both Mentees were Assistant Professors. Thereafter, the program grew substantially to include nine Mentee-Mentor Pairs in 2015, seven Pairs in 2016, six Pairs in 2017, seven Pairs in 2018, and six Pairs in 2019. A total of 44 Mentee-Mentor Pairs have initiated or completed the RSMP to date.

RSMP Application and Matching

Currently, each year, potential Mentees submit applications to the RSMP Director, who reviews the applications and determines whether or not each applicant is a good candidate for the program. Since 2014, Mentees are usually Assistant Professors, and Mentors are Associate or Full Professors. New Assistant Professors are the ideal RSMP Mentee because they often do not have an official Mentor at their college, despite their expanded role (i.e., teaching, research, and service) and demands to progress towards promotion and tenure. While not strictly prohibited, doctoral students and post-doctoral fellows are not typically considered for the RSMP because they likely have existing Mentors and support through their current role and institution.

The Mentee application drives the matching process. Potential Mentees complete a brief form with personal and professional information, which is complemented by a personal statement about their research interests and anticipated benefits from participating in the RSMP. Applicants also submit their full curriculum vitae. As part of the application, potential Mentees are encouraged to explore the list of Academy members and provide the names of three to five possible Mentors (names are selected based on research match and listed in order of preference). Because Academy membership is based on scholarship, the vetting process of the Mentors is less stringent (i.e., they are known to the Academy and accordingly deemed capable of serving as Mentors). Once determined to be a viable candidate for the RSMP, the Director contacts Academy members named by applicants as possible Mentors to solicit their involvement. After agreeing, both parties are formally notified of their inclusion in the Cohort.

RSMP Program Components and Implementation

Kick-off Call. Involvement in the RSMP officially begins with an introductory call with all Mentee-Mentor Pairs in the Cohort. Facilitated by the RSMP Director, the call is hosted about one month prior to the annual conference (the AAHB conference commonly occurs in March each year). On the call, the Director provides Cohort members with a history of the program and details about the program expectations as well as associated timelines. Additionally, Cohort members are informed about networking and recognition opportunities that will take place during the conference. The Kick-Off Call is intended to ‘set the tone’ of the program and garner excitement about the year ahead. It also provides the Director and Cohort members an opportunity to introduce themselves and ask clarifying questions.

Face-to-Face Meeting. During the conference, Mentee-Mentor Pairs are encouraged to spend a minimum of four hours together so they can become acquainted on a personal and professional level. As they interact, Cohort Pairs are supposed to initiate conversations about the Mentee’s goals for the program, their career trajectory and aspirations, and potential areas of focus (i.e., processes and products) for the forthcoming year. The Pairs document these elements on the official Face-to-Face Form. The four hours spent together can be as a formal/informal one-on-one meeting; however, Cohort Pairs can also accrue interaction during conference poster sessions, meals, receptions, etc. Face-to-Face Forms are submitted to the RSMP Director approximately two weeks after the annual conference.

Work Plan. After the conference, each Mentee-Mentor Pair creates an official Work Plan to define the goals, objectives, and overall scope of work for the next 12 months. Work Plans build upon the Face-to-Face Form and challenge Pairs to clearly identify SMART (Specific, Measurable, Achievable, Relevant, Time-bound) objectives (Centers for Disease Control and Prevention, 2015) that coincide with their goals for the 12-month RSMP as well as the primary tasks, actions, and products to be undertaken. Pairs are asked to outline a timeline that indicates important target dates/milestones and describes the communication plan between the Mentee and Mentor. This outline will delineate the frequency of meetings between the Pair (recommended at least monthly), which can be achieved in-person or with the use of telephone or internet-based technology (e.g., based on resources, geographic proximity). It is noted that Work Plans can and will change over the course of the year (this is expected and completely acceptable). Work Plans are submitted to the RSMP Director approximately one month after the annual conference.

Mid-year Report. This report is intended for Pairs to report their progress, accomplishments, and challenges mid-way through the 12-month RSMP. In addition to reporting Work Plan progress, Pairs also report any changes or revisions that have been made to their Work Plan and their future plans to accomplish remaining tasks. Mid-year Reports are submitted to the RSMP Director approximately six months after the annual conference.

Final Report. This report is submitted at the end of the RSMP and serves as the final update about what the Pairs accomplished over the 12-month period. Pairs report a detailed accounting of the processes and tangible products resulting from the Mentee-Mentor relationship. In addition to reporting their accomplishments, this report gives Pairs an opportunity to reflect about the RSMP experience and provide feedback and ‘tips’ for successful mentorship relationships. Final Reports are submitted to the RSMP Director approximately two weeks before the next annual conference (the year after initiating the RSMP).

Recognition. Because Mentees and Mentors are selected to be included in the RSMP through a competitive process, they are recognized in different ways throughout the 12-month

program. First, the RSMP Director and Academy President send letters to the Pairs’ deans/chairs/supervisors to officially notify them about this prestigious accomplishment. Cohort information is listed on the Academy website and promoted in the AAHB Annual Conference materials. During the Conference, poster presentations of RSMP Pairs are ‘flagged’ to highlight the program, and Pairs are recognized during an interactive luncheon supported by the Professional Development and Mentorship Council. This luncheon allows Mentees and Mentors to highlight their accomplishments over the past year and engage other Academy members in discussion about mentorship and strategies for successful collaboration. Pairs are also recognized during an Awards Ceremony at the Conference. While not officially part of the RSMP, many of the RSMP Mentees have been nominated for, and/or received, the AAHB Judy K. Black Early Career Research Award. To date, four of the 12 AAHB Judy K. Black Early Career Research Award recipients have been RSMP Mentees (see https://aahb.org/Awards_JKB for more information).

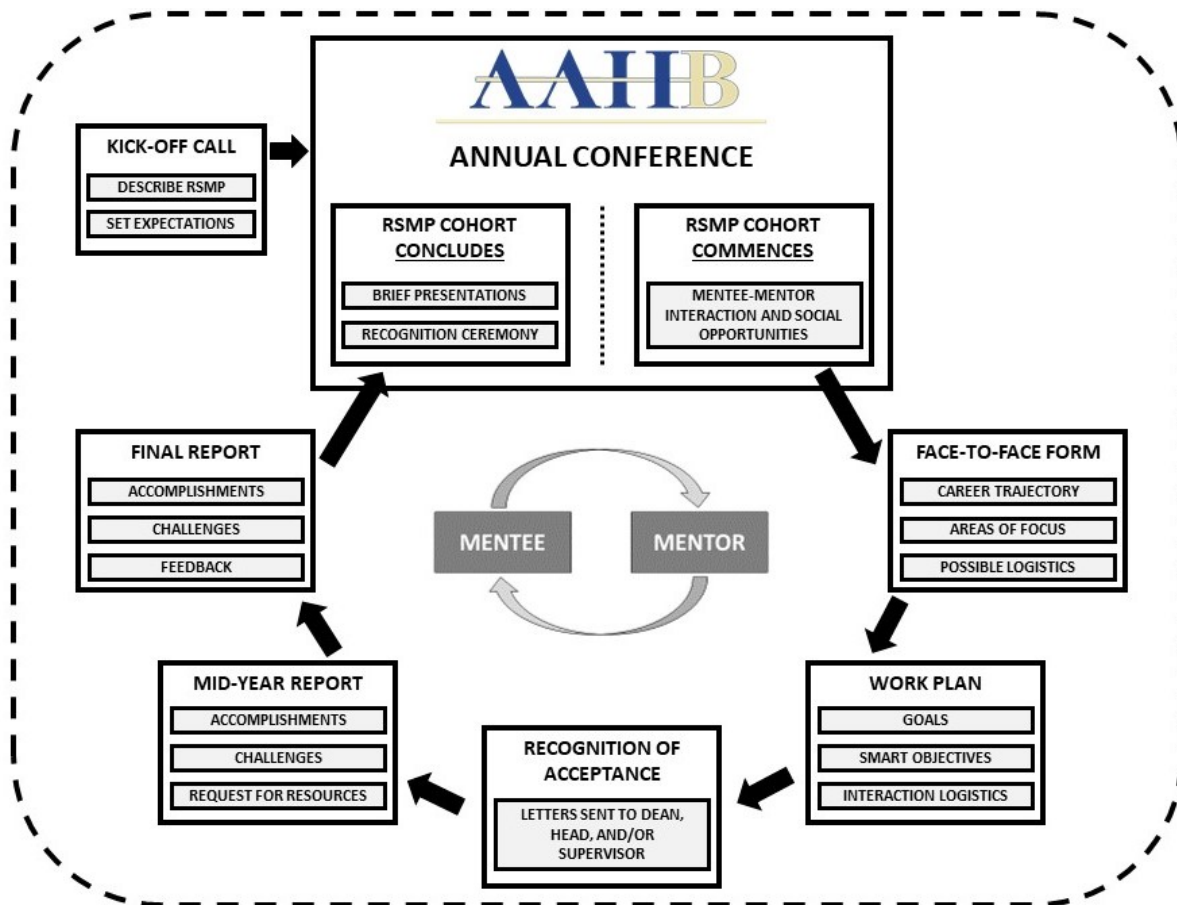


Figure 1. Flow of the 12-month RSMP

RSMP Scholarly Achievements

Table 1 reports a sample of the scholarly achievements of the RSMP Pairs over time. To date, 44 Pairs have participated in the program, of which 38 have completed the program (i.e., the 2019 Cohort is ongoing). Products developed and submitted by the Pairs during the 12-month mentorship period have included grants ($n = 21$), peer-reviewed manuscripts ($n = 64$), and book chapters ($n = 2$). Additionally, Pairs have collaborated to develop new studies ($n = 10$) and courses ($n = 1$). While additional academic products were generated during the one-year RSMP, only those most commonly reported across Cohorts are presented here.

Implications and Future Directions

The AAHB RSMP has implications for advancing the careers of early stage health researchers, expanding research productivity and professional networks, and raising the prestige of the Academy through focused mentorship and resulting process and product gains. The RSMP also enhances the AAHB organization itself by attracting new scholars to the Academy and expanding its membership in purposeful ways (e.g., improving diversity). Moreover, the RSMP provides an excellent mechanism for transitioning student and affiliate members into full members of the organization, and ultimately, into Fellows. This may facilitate the sense of community that is potentially unique to small professional organizations like AAHB, and may contribute to the solidity and viability of the organization over time. Mentors can also benefit from RSMP participation in tangible ways, such as showing evidence of their (often inter-institutional) mentorship for promotion, awards, etc. Thus, we suggest that the AAHB RSMP is an example of a successful formal mentorship program being implemented within a small professional organization of health researchers that can form the basis for like programs within other organizations.

It is difficult to imagine a formal mentorship program that would or should not evolve over time to meet the needs of its stakeholders. To that end, the RSMP must consider future directions for its continued development. Such recommendations may also be useful for other organizations attempting to establish a formal mentorship program. First, given the intimate and small nature of AAHB as a professional organization, the RSMP can expand its evaluative processes to follow Mentee-Mentor pairs over a longer time span. A longer evaluation period can help to determine successful mechanisms of transition to an informal, long-term relationship, as well as to obtain a longitudinal picture of the academic processes (e.g., successful Mentee promotion) and products (e.g., grants eventually awarded) that may emerge following the 12-month formal mentorship program. It is worth noting that because the RSMP does not currently incorporate a long-term evaluation component, scholarly achievements (as those reported herein) likely represent an underestimate of output as a result of the program. To ensure better reporting of the RSMP Cohorts (past and future), a systematic tracking mechanism will document more about the RSMP participants' personal (e.g., age, sex, race/ethnicity, sexual orientation) and professional (e.g., manuscripts, grants, conference presentations, awards and AAHB-related achievements, promotion) information as well as their academic products over time. Likewise, greater attention will be paid to process foci and goal achievement during the 12-month RSMP.

Second, recognizing there are various models of mentorship aside from the conventional one-on-one relationship, the RSMP might be expanded to incorporate other models within or beyond the 12-month mentorship period. These might include group mentoring processes, team

Table 1

Products by RSMP Cohort

	2011*	2012*	2013*	2014	2015	2016	2017	2018	2019**	TOTAL
Number of Mentee-Mentor Pairs	6	n/a	1	2	9	7	6	7	6	44
% Mentees Female***	83%	n/a	100%	50%	56%	57%	83%	71%	100%	
% Mentees Racial/Ethnic Minority***	100%	n/a	0%	0%	33%	43%	33%	57%	33%	
Products										
Grants (written, submitted)				2	7	7	3	2		21
Peer-Reviewed Manuscripts (written, submitted)				0	16	28	6	14		64
Book Chapters (written, submitted)				0	1	0	0	1		2
New Studies (initiated)				0	2	4	3	1		10
New Courses (developed)				0	0	1	0	0		1

* Detailed records not available for Cohort

** Cohort currently participating in RSMP; therefore, no data available to date

*** Estimates for Cohorts with available data

mentoring, peer mentoring, transition to informal mentoring, and/or reverse mentoring (Hanover Research, 2014). Indeed, Mentee-Mentor pairs in the RSMP were given the latitude to informally incorporate these approaches into the Work Plans, and some did. For example, one Mentor in the 2015 Cohort served two Mentees and used a group as well as one-on-one format for mentoring. Other expansions include a more formal “cohort approach” that could be used as a supplement to the one-on-one approach for all scholars to engage with a larger pool of scholars for peer mentoring to garner support and facilitate success (Sorcinelli & Yun, 2007). Peer mentorship may be particularly beneficial for gaining collective input about process- (e.g., promotion and tenure applications and approaches, excellence in job talks) versus product-focused goals. Recognizing the value of multiple mentors and lifelong mentorship, other ways to incorporate peer mentoring to a greater extent can include opening the RSMP to all Academy members, despite academic rank or career level (e.g., pair 2 Full Professors). Finally, although Pairs are comprised of Mentees and Mentors, we all can learn a lot from each other. Known as reverse mentoring, this approach recognizes that the Mentee may actually be well-equipped to provide information and advice to the Mentor within specific domains. This is because Mentees and Mentors have unique skills and have the desire/need to expand their toolbox to meet project goals (and an evolving research agenda). For example, a Mentee may know more than their Mentor about emerging data collection technologies, the use of social media for project promotion, or the use of altmetrics to capture the impact of one’s work. Additionally, by virtue of a continually expanding field, Mentees who are younger than Mentors may be more likely to be from diverse backgrounds (e.g., with regard to race/ethnicity, sex, gender identity) and therefore well-positioned to share unique knowledge with the Mentor in these areas to promote cross-generational comprehension.

Third, the RSMP might be expanded to include ongoing and required workshops or webinar/trainings for the Mentors in areas critical to mentorship (e.g., mentoring across diversity, evidence-based models of mentorship, resolving conflict) to ensure continual growth and maximize quality to enhance the Mentee experience (Borus, 2013; Wilson-Ahlstrom, Ravindranath, Yohalem, & Tseng, 2017). Likewise, extant resources on mentorship from various sources can be compiled for RSMP Mentors as part of their orientation to the program and their responsibilities.

Fourth, attention to the expansion of supportive resources is always necessary. Additional support for the program could entail financial support for conference attendance to ensure that Mentee-Mentor Pairs can attend the annual meeting that precedes and that concludes their formal 12-month RSMP period. Mechanisms that facilitate the presentation of the Pair’s work at annual meetings could be considered (e.g., an award for “most impactful collaboration”). Alternatively, a small stipend for the Mentors’ time and effort and his/her work with the Mentee could be considered to facilitate productivity (e.g., for use in paying for open access publication fees, data collection). Historically and as previously indicated, the RSMP has been supported with the aid of external funding. AAHB would be well served to pursue other external funding mechanisms to enhance and improve the RSMP.

In conclusion, AAHB’s commitment to mentorship and professional development fueled the development of the RSMP to foster inclusive scholarship, expand membership, and promote productivity. The 12-month RSMP is a model for formal mentorship within small professional organizations in that it facilitates Mentee-Mentor Pairs to enhance their professional and research trajectories through the development of products and execution of processes. Despite the

successful history of the RSMP over the past years, there are opportunities to evolve the program for maximized impact.

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The authors would like to thank the American Academy of Health Behavior for supporting this mentorship initiative to enhance professional development among its members. The authors also recognize the dedication of the past and current Research Scholars Mentorship Program (RSMP) Directors and Cohort members, whose productivity and commitment to health behavior research inspires the field. The authors also thank the home institutions of the Cohort members, which value career development and the scholarship of their employees. Lastly, the authors acknowledge and thank the National Institute for Minority Health and Health Disparities for supporting the inaugural Cohort as part of a R13 Conference Planning Grant (NIH, 1 R13 MD005702-01), and the W.K. Kellogg Foundation's Health Scholars Program for providing templates and assisting with recruiting an initial Cohort of post-doctoral scholars to the RSMP. More information about the RSMP can be found at http://www.aahb.org/Research_Scholars.

References

- Beech, B. M., Calles-Escandon, J., Hairston, K. G., Langdon, M. S. E., Latham-Sadler, B. A., & Bell, R. A. (2013). Mentoring programs for underrepresented minority faculty in academic medical centers: A systematic review of the literature. *Academic Medicine: Journal of the Association of American Medical Colleges*, 88(4), 541-549.
<https://doi.org/10.1097/ACM.0b013e31828589e3>
- Borus, J. F. (2013). How to be a good mentor. In L. W. Roberts (Ed.), *The academic medicine handbook: A guide to achievement and fulfillment for academic faculty* (pp. 163-169). New York, NY: Springer.
- Centers for Disease Control and Prevention (2015). Develop SMART objectives. *Public Health Professionals Gateway Resource Kit*. Retrieved from
https://www.cdc.gov/phcommunities/resourcekit/evaluate/smart_objectives.html.
- Goltz, H. H., & Smith, M. L. (2014). Forming and developing your professional identity: Easy as PI. *Health Promotion Practice*, 15(6), 785-789.
<https://doi.org/10.1177/1524839914541279>
- Hanover Research. (2014, January). Faculty mentoring models and effective practices. Washington, DC: Academy Administration Practice.
- Inzer, L. D., & Crawford, C. B. (2005). A review of formal and informal mentoring: Processes, problems, and design. *Journal of Leadership Education*, 4(1), 31-50.
<https://doi.org/10.12806/V4/I1/TF2>
- Johnson, M. O., & Gandhi, M. (2015). A mentor training program improves mentoring competency for researchers working with early-career investigators from underrepresented backgrounds. *Advances in Health Sciences Education*, 20(3), 683-689.
<https://doi.org/10.1007/s10459-014-9555-z>
- McDermott, R. J., & Glover, E. D. (2010). Formation and early history of The American Academy of Health Behavior. *American Journal of Health Behavior*, 34(5), 563-572.
<https://doi.org/10.5993/AJHB.34.5.6>

- Muschallik, J., & Pull, K. (2016). Mentoring in higher education: Does it enhance mentees' research productivity? *Education Economics*, 24(2), 210-223. <https://doi.org/10.1080/09645292.2014.997676>
- Rubin, D. B. (2014). The importance of mentors. In X. Lin, C. Genest, D. L. Banks, G. Molenberghs, D. W. Scott, & J. -L. Wang, *Past, Present, and Future of Statistical Science* (pp. 605-613). Boca Raton, FL: CRC Press.
- Sackett, D. L. (2001). On the determinants of academic success as a clinician-scientist. *Clinical and Investigative Medicine*, 24(2), 94-100.
- Sorcinelli, M. D., & Yun, J. (2007). From mentor to mentoring networks: Mentoring in the new academy. *Change: The Magazine of Higher Learning*, 39(6), 58-61. <https://doi.org/10.3200/CHNG.39.6.58-C4>
- Snowden, M., & Hardy, T. (2012). Peer mentorship and positive effects on student mentor and mentee retention and academic success. *Widening Participation and Lifelong Learning*, 14, 76-92. <https://doi.org/10.5456/WPLL.14.S.76>
- van der Weijden, I., Belder, R., van Arensbergen, P., & van den Besselaar, P. (2015). How do young tenured professors benefit from a mentor? Effects on management, motivation and performance. *Higher Education*, 69(2), 275-287. <https://doi.org/10.1007/s10734-014-9774-5>
- Wilson-Ahlstrom, A., Ravindranath, N., Yohalem, N., & Tseng, V. (2017, September). *Pay it forward: Guidance for mentoring junior scholars* (updated edition). Washington, DC: Forum for Youth Investment.