**Proposal for an academic coaching group**

**Problem:**

Many students in IPiB report that they do not feel like the program is as supportive and inclusive as it could and should be. Because a clear sense of belonging by students has been shown to foster better outcomes in higher education, it is critical that IPiB directly address student sentiment with regard to inclusion, support, and community. It is not sufficient to simply claim, “[Our students, faculty, and staff form a tight and inclusive multinational community.](https://ipib.wisc.edu/why-ipib/)” This statement must be supported with actions and activities that will ultimately make it come to fruition.

**Solution:**

Create opportunities for interactions with members of the community, including professors that build a sense of connection and provide value-added interactions with peer, near-peer, and senior mentors. To implement this change within our community, I propose that we implement academic coaching within IPiB.

**Rationale:**

Within the current IPiB programming, students develop relationships with professors (other than their advisors) primarily through the formation of a thesis committee. This academic committee is made up of 4-5 professors and is intended to support a student’s professional and academic progress. The committee meets formally once per year to evaluate a student’s progress towards their degree and offer mentoring advice. While students are encouraged to meet with their committee members outside of these annual meetings, students generally find it difficult to impose on their committee members. Because of power dynamics, social structures, and other factors students do not feel empowered to take the actions that would best serve their overall needs in navigating professional challenges. [So what’s the issue here? Put that here.; Christina’s wording, maybe change?]

In addition, data from the IPiB 2023 Climate Survey indicate that there is a disconnect between how welcoming the IPiB program is between faculty and graduate students. When faculty responses are dissected as a group, their responses with respect to **women**, **underrepresented** **minorities**, and **individuals from financially disadvantaged backgrounds** are more positive than the responses of **graduate students** from those groups. [I’m not sure I understand comparators are for this analysis . . . faculty responses dissected as a group are distinct from women?? Aren’t about half of the faculty respondents women? I can’t see how this can distinguish anything unless the comparator group is faculty women vs. graduate student women. What am I missing?] This suggests that faculty perceive the IPiB program to be more welcoming to individuals of these groups than people found within these groups.[I don’t doubt this, but I can’t see how the comparators used lead to this conclusion.] By further developing relationships between faculty and students within coaching groups, faculty may develop a better understanding of the struggles that groups such as these face within the program. By creating these coaching groups, students and faculty will have an additional opportunity to bridge the gap and share perspectives on a variety of topics, with a focus on helping students attain both their professional and personal goals.

Academic coaching allows students to reflect on successes and challenges alongside a faculty coach, who aids students with their experience to help create goals and develop plans1. Medical schools around the United States have begun implementing a voluntary coaching group for their students2. The goal for these groups is to create a safe and supportive environment for students to reflect on both academic and personal goals alongside a faculty coach. **“Coaching allows for a consistent, longitudinal, and open relationship that is neither supervisory nor evaluative, but offers structured opportunities for students to discuss personalized, actionable goals and action plans as they progress through different phases of medical school.2”** [More recently, a coaching program at UW-Madison is being started by the Office of Human Resources.](https://hr.wisc.edu/professional-development/programs/coaching-circles/?utm_medium=email&utm_source=wordpress_workingatuw&utm_campaign=facstaff_comms&utm_content=2023_06_07)3 Through the help of people on campus as well as the attached resources, IPiB should be able to develop a coaching program that benefits and builds relationships within our program4,5.

**Plan**

Create a curriculum based on goal-oriented discussion, similar to medical coaching examples. Implement a 1-year trial run with any interested students and faculty. Use feedback to determine if participants thought this was helpful in terms of personal and professional development, and/or with strengthening the IPiB community.

Session Structure6

* Check-in: Spend a few minutes just talking about how things are going.
* Review goals: Are you making progress? Do your goals need to be revised?
* Discuss new goals: What changes would you like to make to feel more successful?
* Review frequency of meetings: Be aware of your own needs and seek guidance. Don’t be afraid of speaking up, but then also be sure to follow through.
* Wellness: Discuss how you are incorporating personal interests into your life to preserve your well-being. Have a mindful discussion about maintaining balance through transitions.
* Follow-up: Close with plans for the next session and record pertinent thoughts and discussions.

Goals

* Provide a safe space for student/faculty supported reflection on academic, personal, and professional goals
* Assist students in developing goals for their personal satisfaction and professional future
* Encourage reflection and shared perspectives between students and faculty within IPiB to enhance the camaraderie within our “**tight and inclusive** multinational community”

Idea outline

1. Determine curricula for each meeting, modified from the AMA coaching handbook and other medical coaching resources
2. Create small groups of 5-6 from volunteering students
3. Find 1-2 faculty members to facilitate and lead each coaching group
4. Meet 3-4 times a year
5. Evaluate the coaching experience7

**Sources**

1. [Academic coaching in medical education](https://www.ama-assn.org/education/changemeded-initiative/academic-coaching-medical-education#:~:text=An academic coach is a person assigned to,achieve these%2C and helping the student be accountable)
2. [Coaching in Medical Education Handbook](https://www.ama-assn.org/system/files/2019-09/coaching-medical-education-faculty-handbook.pdf)
3. [Coaching Circles at UW-Madison](https://hr.wisc.edu/professional-development/programs/coaching-circles/?utm_medium=email&utm_source=wordpress_workingatuw&utm_campaign=facstaff_comms&utm_content=2023_06_07)
4. [American Medical Association Coaching Overview](https://www.ama-assn.org/education/changemeded-initiative/academic-coaching-medical-education#:~:text=An academic coach is a person assigned to,achieve these%2C and helping the student be accountable.)
5. [A starter’s guide to pursuing an academic coaching program](https://www.ama-assn.org/education/accelerating-change-medical-education/starter-s-guide-pursuing-academic-coaching-program)
6. It Takes Two: A Guide to Being a Good Coachee (attached)
7. Wolff, M. *et al.* Academic coaching: Insights from the medical student’s perspective. *Medical Teacher* **42**, 172–177 (2020). [Source](https://www.tandfonline.com/doi/full/10.1080/0142159X.2019.1670341?journalCode=imte20)