



Turning Challenge Into Growth: Training Medical Student Resilience

JENNIFER DAVIS, MS & MARA MCADAMS, MD



The Growing Need For Resilience

Physician burnout is a global issue that hasn't spared Singapore, nor has it spared medical students. Addressing burnout requires a multifactorial approach to prevention and treatment, and interventions differ based on an individual's career stage. For medical students, bolstering resilience is essential to prevent depression, anxiety and burnout, as well as to sustain motivation for learning and passion for a career in medicine while under chronic stress and overwhelming curricular demands.

team skill-building workshops, and team coaching sessions. Self and team assessments increase awareness about preferences for learning and decision making, approach to conflict, and the desire for inclusion and control. Workshops address emotional intelligence, growth mindset, mindfulness, identity crisis, giving and receiving feedback, critical reflection, stress and coping, and personal wellness. The aim is to train students to engage more effective and positive coping pathways instead of habitual patterns unlikely to be sufficient under medicine's challenging circumstances.

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Empathy and burnout: a study on residents from a Singapore institution

Phong Teck Lee¹, MBChB, Julian Loh¹, MB BCh BAO, Gerald Sng², MBBS, Joshua Tung², MBBS, Khung Keong Yeo^{1,3}, MBBS

INTRODUCTION Empathy and burnout are two entities that are important in a physician's career. They are likely to relate to each other and can be heavily influenced by surrounding factors, such as medical education, local practices and cultural expectations. To our knowledge, empathy and burnout studies have not been performed in Singapore. This study was designed to evaluate empathy and burnout levels using the Jefferson Scale of Physician Empathy (JSPE) and Maslach Burnout Inventory (MBI) among residents in Singapore, and compare them with the United States (US) literature.

METHODS The JSPE, MBI and a self-designed questionnaire were completed by 446 trainees at a residency-sponsoring institution in Singapore.

RESULTS Residents in Singapore had lower empathy and higher rates of burnout compared to US literature. Physician empathy was associated with burnout: residents with higher empathy scores had higher personal accomplishment ($p < 0.001$, $r = 0.477$, $r^2 = 0.200$); and lower emotional exhaustion ($p < 0.001$, $r = 0.187$, $r^2 = 0.035$) and depersonalisation ($p < 0.001$, $r = 0.321$, $r^2 = 0.103$) scores.

CONCLUSION Residents in Singapore had lower empathy and higher burnout scores compared to the US literature. Further research into the underlying cause is imperative to guide intervention.

Keywords: burnout, physician empathy



I'm either good at it, or I'm not. Failure is the limit of my abilities. Tell me I'm smart. My abilities determine everything. If you succeed, I feel threatened.



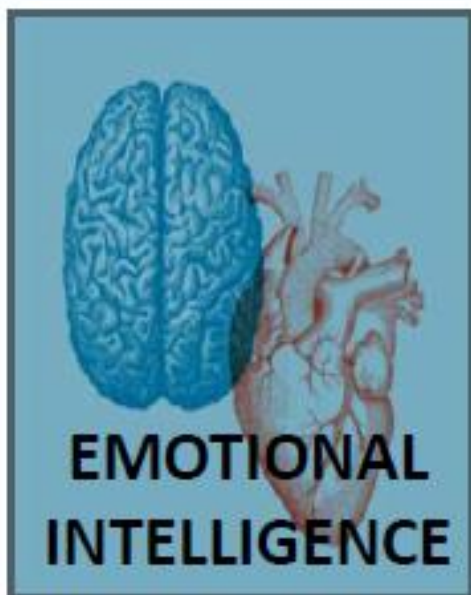
I can learn anything I want to do. Failure is an opportunity to grow. Tell me I try hard. My effort and attitude determine everything. If you succeed, I feel inspired.

Key Learnings

We have observed positive changes in how students approach challenges, such as academic failure or imposture syndrome. More often the approach shifts from disempowered helplessness to greater self-awareness of how their thoughts and beliefs may be making things worse. Students also acknowledge enhanced cognitive flexibility through practicing adopting a growth mindset and challenge destructive thinking, are more likely to reach out for support, and generally improve self-care. A key learning is that student buy-in improves when we partner a physician mentor to share how they have overcome challenges using these specific skillsets. Our focus going forward is to further engage physician leaders as partners in building student resilience.

Developing Resilience

In an effort to equip medical students with the ability to thrive in medical school and throughout their medical career, Duke-NUS incorporated a resilience syllabus into the CARE-Phase 1 (Connect, Assimilate, Reflect, Explore) course. CARE-Phase 1 is comprised of a series of personality assessments, personal and



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