



Embedding Compassionate Courageous
Cross-Cultural Conversations into Training



Psychiatry
Teaching Unit

Professor Subodh Dave

Consultant Psychiatrist,
Derbyshire Healthcare NHS Foundation Trust
Dean, Royal College of Psychiatrists

Janet Allison

Clinical Educationist, NHS
Post-graduate researcher - education,
Anglia Ruskin University

EQiT – Embedding Compassionate, Courageous, Cross-cultural Conversations into Training

It is recognised that International Medical Graduates (IMGs) coming to the NHS often have a different set of learning needs compared to their UK trained peers. Communication styles (e.g. for some English may not be the first language), cultural attitudes and behaviours (e.g. unfamiliarity with organisational culture and dynamics), different belief systems and values especially pertaining to learning and clinical practice (e.g. unfamiliarity with OSCEs as an assessment tool, varying degrees of doctor-patient power differentials) are some areas where IMG learning needs may differ. Equally important, but often forgotten, is that IMGs bring strengths to the UK workplace (e.g. working in high-volume, high pressure services). Having a sensitive discussion with IMGs to explore these strengths and learning needs should be the bedrock of an individualised learning agreement within supervision. However, educational and clinical supervisors often feel awkward in addressing such issues head-on, and so they are commonly not spoken about. Professor Dave, in his role as Associate Dean for Trainee Support at the RCPsych, instigated the training in 2015, and it was collaboratively produced by a team of IMG doctors with lived experience of the difficulties and a clinical educationist with expertise in experiential learning, with the aim of opening up conversations amongst supervisors to address these difficulties. Over the last 7 years, the workshop has developed into an effective intervention to challenge and enable supervisors to undertake sensitive culturally aware conversations with their IMG supervisees. The workshop draws on adult

learning theory to generate a safe space in order to maximise engagement in what can be personal and provocative topics. The workshop design aims to lead participants through a learning process, initially sharing differing perceptions and challenges, then establishing a commonality in knowledge and progressing to explore both personal awareness and practical strategies to enhance the supervisor/supervisee relationship with IMGs.

Learning outcomes

The supervisory relationship was chosen as the workshop focus as it is recognised as a key factor in determining whether an IMG trainee is likely to be subject to differential attainment or not (Daga et al., 2021). The learning outcomes intend for supervisors to know: 1. What is differential attainment and what is its impact, including why does it occur and why is it my responsibility; and 2. What can I do about it, meaning how can I address pertinent factors in regard to differential attainment within the supervisory relationship, and how might that look in practice.

Learning theory

The workshop is underpinned by key principles of acceptance, compassion, respect and a lack of judgement both towards IMGs and for other workshop participants and their views (Kotler and Englar-Carlson, 2015). There is an explicit recognition that for many in the workshop, there will be personal experience of where compassionate conversations have not occurred, and whilst this is useful to explore for learning, it is essential to acknowledge that for some, personal experience in supervision as an IMG has been difficult.

The workshop utilises a social constructivist approach, incorporating experiential learning. Social constructivism recognises that each participant has their own experience and perspective and that through sharing and building those perspectives together, a greater and deeper understanding can be achieved than any individual could achieve on their own (Kolb, 1984; Twomey Fosnot, 2005). The initial stages of the workshop therefore establish where the group sits in regard to understanding of differential attainment and the impact this creates, establishing perceived relevance to current practice. From this position, the workshop enables participants to progress to the next level of understanding, or into the 'zone of proximal development' (Vygotsky, 1978), utilising the 'what's in it for me' factor to promote

engagement (Knowles 1975), linking current understanding to what would be useful to know in practice (see figure 1).

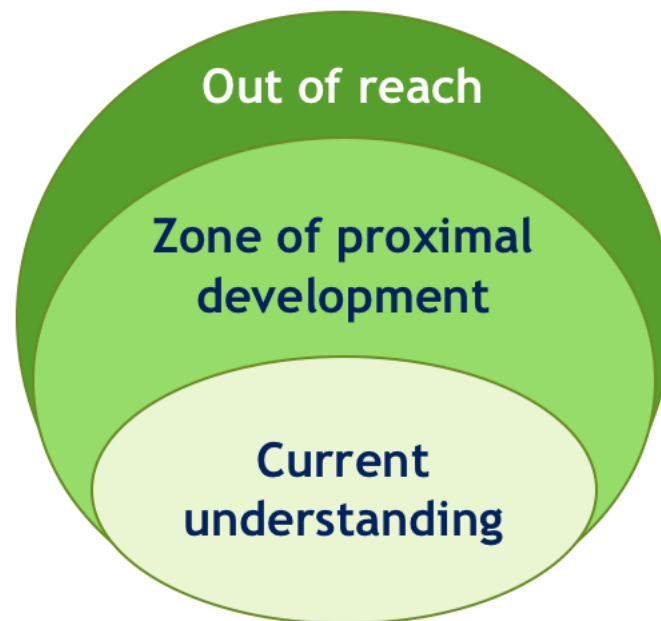


Figure 1 – the Zone of Proximal Development for maximum learning potential, in between current understanding and learning that is out of reach (of Vygotsky, 1978).

In line with social constructivism, the workshop leaders ‘facilitate’ more so than ‘teach’, taking on the role of ‘midwife to learning’ (Jones, 2005) or at times provocateur (Boal, 2000). A non-doctor clinical educator is deliberately used to facilitate the experiential elements of the workshop, aiming to create a liberty in discussion through use of an ‘outsider’ without a true supervisor persona, with no vested interest to protect or promote but able to stand outside the potentially emotionally charged supervisory scenarios and negotiate a place of shared understanding from at times opposing views.

Workshop activities

First half : What is differential attainment and how does it impact:

1. Gathering of anonymous views and feelings about differential attainment - to establish perceptions of the group as a whole and open up the sensitive subject in an overt yet sensitive way – naming the elephant in the room. The online tool ‘Mentimeter’ is used to ask participants to anonymously describe their thoughts or feelings about differential attainment, with the words used being put into a word cloud in real time (see figure 2). The words appearing are acknowledged but not explored in depth or challenged, promoting acceptance of all opinions.



Figure 2 – Example of Word Cloud generated by Mentimeter, showing initial thoughts and feelings re differential attainment.

2. Presentation - a short presentation to provide facts and figures regarding differential attainment and the impact upon career progression at a national level. This is followed by a discussion of reactions to the facts presented, enabling the group to begin to share their own experiences.

3. Small group discussion and plenary – breakout rooms are used to enable smaller group discussion on the impact of differential attainment in three key areas – a. on the IMG personally; b. on the supervisor, and c. on the wider healthcare system. This is followed by whole group plenary, providing opportunity not only for small group feedback, but for the sharing of individual’s related experiences, thereby increasing the sense of relevance through personalisation so as to maximise the ‘buy in’ as to how the group can improve the situation.

Second half : How to make it better

4. Forum theatre based intervention - to enable participant projection onto a fictional supervisor, facilitating exploration of what is good/helpful practice and what is not and why that might be. Forum theatre roots in the work of Augusto Boal (2000), and in this

context, bespoke film clips of two scenarios are used as the initial ‘theatre’ or stimulus: - 1. the initial supervisory meeting and 2. giving negative feedback (see figure 3), with lived experience of IMG trainees informing the ‘stories’. The scenarios aim to provoke a ‘forum’ for debate, assisted by the facilitator or provocateur, to explore what is helpful and what unhelpful in the conversations and why that might be. The scenes are then ‘brought live’, being re-enacted in sections, with the fictional supervisor being directed by the participants to experiment with alternatives, alongside group debate on both the rationale for choices made and the subsequent impact on the supervisor and supervisee and their conversation. This aims to promote self-reflection by projecting multiple flaws onto the fictional supervisor, in order to help overcome the natural defensiveness that often acts as a barrier in identifying biases in oneself. Overall EQiT, through objective externalization/projection, enables the development of insight into one’s own prejudice without direct exposure (Jones, 2007), and thus provides a safe place to explore different ways to address prejudicial attitudes and behaviours.



Figure 3 – Forum theatre – the initial supervision session, Dr Jones, supervisor, meets Dr Anna Costa, IMG trained from Brazil – filmed with common errors.

5. Capturing learning to take forwards – at the end of the workshop, Menti is again used to enable participants to share their learning, and how they intend to alter their practice (see figure 4).

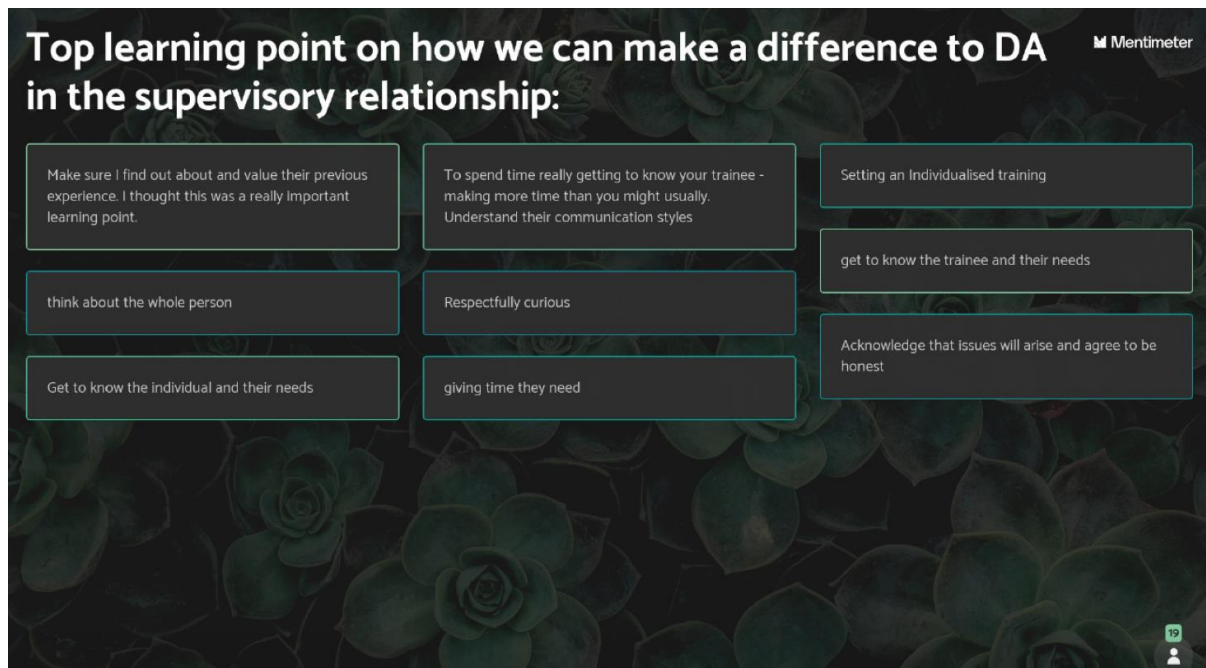


Figure 4 – Learning points to take forward into improved supervisory relationships with IMG supervisees.

Conclusion

The EQiT workshop is designed to create a safe, non-judgemental space for honest debate around the difficulties supervisors face in trying to address differential attainment related to culture with IMG supervisees, and what can be done to help. A social constructivist pedagogy and associated experiential learning strategies are deliberately chosen that participants might be enabled to not only appraise the evidence but also to share their own experiences and learn from each other, collaboratively gaining insight and understanding, that they might co-construct practical ways to embed compassionate, courageous, cross-cultural conversations into training.

Acknowledgements:

We would like to acknowledge Dr Marilia Calcia, Dr Roshelle Ramkisson and Dr Raja Natarajan for their contribution to the development of EQiT.

Contacts:

For enquiries about the EQiT training programme, please contact subodhdave@nhs.net

References

Boal, A., (2000) *Theatre of the Oppressed*. UK. Pluto Press

Daga, V., Blizzard, R., Dhelaria, A., Hosdurga, S., Hussain, S., Mababhusi, S., Sawney, G., Shah, A., Theocharidou, L., Shah, R. (2021) Differential attainment in career progression of doctors in the UK. *Sushruta J Health Policy & Opinion* vol 14; Issue 1: 1-16 DOI: <https://doi.org/10.38192/14.1.8>

Jones, G.G., (2005) *Gatekeepers, Midwives and Fellow-travellers: the Craft and Artistry of Adult Educators*. London. Mary Ward Centre

Jones, P., (2007) *Drama as Therapy, Volume 1*, London, Routledge

Knowles, M., Knowles, H., (1972) *Introduction to Group Dynamics*. Chicago. Follet

Kolb, D.A., (1984) *Experiential Learning: Experience as the Source of Learning and Development*. New Jersey, Prentice Hall.

Kotler J.A., Englar-Carlson M., (2015) *Learning Group Leadership : an Experimental Approach*. London. Sage

Mentimeter – www.mentimeter.com

Twomey Fosnot, C., (2005) *Constructivism - Theory, Perspectives and Practice*. New York. Teachers' College Press

Vygotsky, L., (1978) *Mind in Society: Development of Higher Psychological Processes*. Cambridge MA: Harvard University Press.