



Date: February 7<sup>th</sup>, 2020  
 Time: 8.45-17.15  
 Venue: UMCG Education Center, Hanzeplein 1, 9713 GZ Groningen  
 Registration: Please register through the link in the invitation email and subscribe for the workshop you wish to attend.

#### PROGRAMME

- 08.45-09.15 Welcome & registration
- 09.15-09.25 Opening by prof. dr. Debbie Jaarsma, programme leader LEARN, SHARE/GSMS
- 09.25-10.00 Lecture: introduced by dr. Joke Fleer, associate professor Health Psychology
- LEARNing under stress**  
 Prof. dr. Marian Joëls, Dean of the UMCG and Professor of Neurobiology of Environmental Factors
- 10.00-10.15 Comfort break
- 10.15-11.15 **Round 1** Parallel sessions of short and quick communications
- 11.15-11.45 Coffee/tea break
- 11.45-12.30 Rein Zwierstra Lecture: introduced by prof. dr. Paul Brand, programme leader LEARN
- Growing a feedback culture in medical education**  
 Prof. dr. Chris Watling, a leading scientist in the field of medical education, exploring the individual and sociocultural influences on how feedback, direct observation, and coaching play out in clinical settings. He is Director of the Centre for Education Research and Innovation and Professor in the Departments of Oncology and Clinical Neurological Sciences at the Schulich School of Medicine & Dentistry at Western University in London, Ontario, Canada.
- 12.30-13.15 Lunch
- 13.15-14.15 **Round 2** Parallel sessions of short and quick communications
- 14.15-14.30 Comfort break
- 14.30-15.45 **Round 3** Round of parallel workshops
- 15.45-16.00 Comfort break
- 16.00-16.30 Lecture: introduced by dr. Joke Fleer, associate professor Health Psychology
- Doctors, stress and the impossibility of redemption**  
 Drs. Menno de Bree, teacher in ethics and philosophy at the UMCG, writer and public speaker, and author of a weekly column in "Het Financieele Dagblad."
- 16.30-16.45 Closing
- 16.45-17.15 Drinks

## WORKSHOPS

### **Exploring complexity with Rich Pictures: Introduction to a novel data collection tool**

*Dr. Marco Carvalho Filho & dr. Floor Velthuis*

Complexity is a multi-faceted phenomenon, with powerful implications for training and practice. Responses to complexity are varied and poorly understood. However, an emotional component can often be identified. In this workshop, we will give examples from our current lines of research in which we use Rich Pictures to explore how medical trainees understand and learn to deal with complex clinical situations. Rich Pictures are visual representations that capture everything that adds to a complex situation, e.g., people and materials, thoughts and emotions, empathy, or conflict. In the workshop, we will ask participants to draw their own Rich Pictures, inviting them to visualize a complex situation, in order to provide them with hands-on experience with this data collection tool. After this exercise, participants will be asked to pair up and engage in a conversation using the drawing as the anchor. This will serve as a means to develop experience in talking about Rich Pictures and may facilitate a discussion about how to analyze those data.

### **Cross-Cultural Coaching**

*Prof. dr. Götz Wietasch & dr. Martine Yntema*

The internationalization of PGME programs has an impact on how to coach and provide feedback to residents. Cultural aspects are important factors that influence the results of feedback and coaching. Research shows that educational concepts cannot easily be transferred from one country to another. When implementing coaching programs for residents, the cultural difference between countries as well as local context and needs and diversity of residents have to be taken into account. In this workshop, we introduce the five dimensions of cultural difference (Hofstede), which are necessary to understand the cultural differences. In an interactive session, the models will be used in small groups to recognize and analyze the cultural aspects of your PGME program, to increase your insight and ability to develop and implement cross-cultural coaching in your daily practice.

### **Feedback culture in hospital departments: Its effects on learners**

*Prof. dr. Paul Brand (Zwolle and Groningen, the Netherlands) & prof. dr. Chris Watling (London, Ontario, Canada)*

In faculty development initiatives, giving constructive feedback is usually approached and taught as a technical skill to be learned and mastered. As a result, faculty members commonly complain that applying a feedback technique feels like performing a trick, and actually keeps them from providing the gently critical meaningful feedback they intend to give the learner. In this workshop, we will explore how teaching faculty in hospital departments can analyze, assess, and modify their department's feedback culture to overcome this barrier to providing meaningful feedback to their learners. We will show how each medical specialist can contribute to shaping a feedback culture that will foster the growth of both learners and faculty, and an open discussion of uncertainties and errors.

### **Embracing imperfection and vulnerability: Self-disclosure in the health professions**

*Two psychiatrists help break the stigma by sharing their own mental health stories: Medical education lessons from Yale, Tel-Aviv, the Netherlands and beyond.*

*Andrés Martin, MD, MPH (New Haven, CT, USA & Ramat Aviv, Israel) & Cecil Prins, MD (GGZ Drenthe, Beilen, the Netherlands)*

Mental illnesses are real, common and treatable conditions. Being a health professional does not immunize us from being afflicted ourselves. We are two (child- and adolescent) psychiatrists with lived experiences of mental illness in ourselves and in our families. For years we kept these personal stories to ourselves, until we independently felt a sense of urgency to share them with colleagues and students. Before doing so we had to overcome internalized stigma and become comfortable in showing our vulnerability and imperfection to others.

Medical students can benefit from the availability of and exposure to physicians with self-disclosed histories of living with and having overcome mental illnesses. In a recent study, we confirmed empirically how such exposures could favorably improve stigmatized views about psychiatry, about patients with mental illnesses, and, most importantly, about students' struggles and human fallibility. Interventions of this type have the potential to help improve a medical culture of perfectionism and silence, and ultimately to enhance medical students' mental and emotional health and their help-seeking behaviors.

We believe that efforts such as this are timely and sorely needed, as the field of medicine and the healing professions seek to better care for their own.

By the end of this interactive workshop, participants will:

- Appreciate the role of internalized stigma and other reasons why physicians and trainees do not access care when they need it;
- Recognize simple, evidence-based steps that programs and hospitals can implement on a local grassroots level to remove existing local barriers to care, increasing the likelihood that health care professionals and trainees can get help when they need it; and
- Return to local institutions and communities with knowledge as to how to implement practical resources.