

Adapting to change during challenging times

In our January 2020 Editorial, we drew the attention of our readers to “Grit in Healthcare Education and Practice”. In particular, we focused on developing the “Grit” of students and trainees; medical students who are well-equipped with the ‘Power of Grit’ will display a “*passion for patient well-being and perseverance in the pursuit of that goal [which] become social norms at the individual, team and institutional levels*” (Lee & Duckworth, 2018). However, never could we imagine then that such an attribute (i.e. ‘Grit’) would become contextual so soon, as exemplified by the passion and perseverance of healthcare practitioners in patient care in their response to the serious disruptions in individual health (including fatalities) caused by the Covid-19 pandemic!

We are pleased to have this opportunity to share with our readers, yet once again, the unexpected course of events associated with the Covid-19 pandemic which brought out the best in many on a global scale. In particular, as the education and training of medical students, residents and those in allied health institutions were disrupted by the Covid-19 pandemic. The educators supported by the administration in medical and health professions institutions designed curricula innovations that incorporated culturally sensitive interventions to develop individual resilience and well-being in order to support the community of learners—including students, faculty, administrators involved and of course, patients.

The current Covid-19 pandemic served as a catalyst that provided opportunities for educators to rapidly and creatively design safe, yet effective, novel and innovative solutions to ensure continuation in the education and training of medical and closely allied health professional students (Samarasekera, Goh, & Lau, 2020). Thus, there is a need to break away from decades of tradition in designing such educational strategies for continued student learning, as a rapid response to the Covid-19 pandemic. In this context then, both, institutional as well as program leadership are required to facilitate the process for the design of creative, yet safe, effective and innovative strategies for the continuation of student learning; such a step is expected to mitigate the disruptive effects of the Covid-19 pandemic! In this context then, educators leverage on available technology as the preferred mode for the delivery of instruction to students. The learning environment was also transformed from one that was predominantly classroom-based to one that is mainly online. It is also gratifying that, both, junior and senior faculty have embraced the use of technology, although some degree of ‘resistance’ to the use of technology in education was experienced earlier. Perhaps, a *caveat* should be added: student learning using technology over a long period of time may result in a lack of social interaction among the students and, consequently, a lack of preparation for teamwork which is so critical for healthcare practice in the 21st century.

The Covid-19 pandemic has also exposed wider societal gaps which were seldom evident previously, but needs to be addressed. It is useful then to note that The Lancet Global Independent Commission had already expressed, in its Report (Frenk et al., 2010) that “*Indeed, the use of IT might be the most important driver in transformative learning*” and that “*Advanced information technology is important not only for more efficient education of health professionals; its existence also demands a change in competencies.*” The ‘Report’ also drew attention to the fact that “*IT-empowered learning is already a reality for the younger generation in most countries,*” However, due to financial constraints, the ‘Report’ also cautioned that “*Not all students, of course, have full access to IT resources*” and suggested “*A global policy to overcome such unequal distribution of digital resources [referred to as the digital divide]*” Attention to such inequalities have also been recently addressed by Blundell, Costa Dias, Joyce, and Xu (2020).

A major concern of medical and allied health professional institutions is the well-being of students and staff who ensure the continuation of student education and training disrupted by the Covid-19 pandemic. Many institutions provided strong support to students and staff in such challenging times. Students received financial support and, if required, counselling as well in order to enhance their psycho-social well-being. Students infected by the virus or who were quarantined received special care. Many institutional policies were swiftly revised to match the rapidly changing environment: clear lines of communication were established for staff and students (Ashokka, Ong, Tay, Loh, Gee, & Samarasekera, 2020).

A more resilient community of staff and students have remarkably emerged from the trials and tribulations experienced: students have adapted rapidly to blended and virtual learning environments. Students have also organised their learning engagements around virtual student communities, as most institutions have minimised their face-to-face classroom activities. Faculty responded by designing a more adaptive curriculum that is flexible to the needs of the learner. Pre-clinical and clinical learning activities were further refined and streamlined with the removal of some content and examinations—a process unthinkable prior to the crisis (disruptions) of the Covid-19 pandemic; the prior status involved strict control of the curricula which was managed by the institution and/or professional / statutory bodies. Within a short period of time newer course materials and assessment instruments, all aligned to support online, blended or hybrid learning requirements, were developed. However, the most significant contribution from staff to the disrupted student learning is the proactive support to optimise and meet the needs of learners in the crisis triggered by the Covid-19 pandemic! Such an action by the staff were greatly appreciated; stronger bonds with a closer community spirit between the students and staff were soon established.

In conclusion, it can be said that medical and allied health professional educators have benefitted much (lessons learnt) from the disruptive effects of the Covid-19 pandemic on student learning. Instead of wallowing in self-pity, sadness and simply awaiting time-out. A determined and focused faculty can mitigate the effects of the formidable challenge posed by the Covid-19 pandemic by responding rapidly to make changes to the learning environment—using appropriate technology to deliver instruction to students, in order to ensure the continuation of safe, timely, and quality education!

Providing constant support to students by the staff and the institution will help students develop relevant coping strategies that foster their resilience and well-being. Ultimately, a community of learners and practitioners will emerge with the ability to provide and maintain quality healthcare during challenging times like the one we are now experiencing.

Dujeepa D. Samarasekera & Matthew C. E. Gwee
Centre for Medical Education (CenMED), NUS Yong Loo Lin School of Medicine,
National University Health System, Singapore

Ashokka, B., Ong, S. Y., Tay, K. H., Loh, N., Gee, C. F., & Samarasekera, D. D. (2020). Coordinated responses of academic medical centres to pandemics: Sustaining medical education during COVID-19. *Medical Teacher*, 42(7), 762-771.

Blundell, R., Costa Dias, M., Joyce, R., & Xu, X. (2020). COVID-19 and Inequalities. *Fiscal Studies*, 41(2), 291-319.

Frenk, J., Chen, L., Bhutta, Z. A., Cohen, J., Crisp, N., Evans, T., ... & Kistnasamy, B. (2010). Health professionals for a new century: Transforming education to strengthen health systems in an interdependent world. *The Lancet*, 376(9756), 1923-1958.

Lee, T. H., & Duckworth, A. L. (2018). Organizational grit. *Harvard Business Review*, 96(5), 98-105.

Samarasekera, D. D., Goh, D. L. M., & Lau, T. C. (2020). Medical school approach to manage the current COVID-19 crisis. *Academic Medicine*, 95(8), 1126-1127.