Failure is always an option: Part 2

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For part 1 of this series, see Tuesday’s post. How does resiliency work in our daily lives?

Resiliency helps us survive, it prevents burnout and allows a person to stand up after a fall. Dunn et al. describe the concept of coping reserve where each person has a discrete amount of coping skills. Positive factors such as social interactions, mentorship and a raison d'être replenish these skills, while negative factors such as internal conflicts (personality, external conflicts (interactions) and resources constraints (money, time, opportunities, etc.) drain this reservoir. Fragility functions as an evacuating valve (here fragility is understood as vulnerability), while resilience works as an input valve, providing renewed skills of coping. The goal of every person facing adversity is to aim for achievement by allowing resilience to replenish the reservoir, while decreasing negative inputs by stopping the fragility-lead drain that leads to burnout.

Figure. The Coping Reserve. Original, adapted from Dunn et al. 2008. Why teach about failure and resiliency?

Failure is a constant in our lives and careers. We fail for many reasons, ranging from our inattention to (complex) errors or as part of exploration (positive failure). As Clinician Educators we have to ensure that our learners can face failure and learn from it, both in their academic and personal lives. We all need to understand that our failures will be as common as our success.

Resiliency training is necessary to limit attribution of negative feelings to the events leading to failure. It is important to understand that our beliefs guide our emotions and not the objective appraisal of the event. Failure is not always negative, failing is acceptable as long as there is a framework for detecting
failure, learning about the complex systems and factors leading to it, and creating a solution to overcome it.

Adaptation is a major domain necessary to conquer failure and drive achievement. Creativity, inventiveness, ingenuity and entrepreneurism define this capacity. Adaptation requires two important elements, one is the ability to interpret the situation correctly and the second is persistence to achieve an ultimate (higher) goal. When life gives you lemons, you make lemonade not necessarily because you like it, but because you are thirsty.

Medical education needs a curriculum on learning and teaching resiliency. There is a lot we can learn and adopt from psychology and management theories, but a basic resilience framework can be outlined as:

- Understand the environment
  - Recognize the circumstances
    - Approach with realistic optimism
  - Adversity is common
    - Consequences arise from the event
    - Belief and emotions should not bias the interpretation of events
  - Failure is dichotomous with opportunity
- Understand the raison d’etre and yourself
  - Create a raison d’etre
  - Adjust goals to the raison d’etre
  - Acts are only significant as a function of a goal
    - The goal is set and varies from person to person
  - Create and nurture coping skills
  - Persistence requires discipline
- Understand the plan
  - Ability to adapt and react
  - Adapt to resource limitations
  - Foster ingenuity to adapt to new scenarios

Our learners need to develop true grit. They need to understand that long lasting success and achievement requires adaptation to adversity.

Further Reading

- Howe A, Smajdor A, Stöckl A. Towards an understanding of resilience and its relevance to medical training. Medical Education. 2012 Apr 1;46(4):349-56.

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