

Teachers are teachers everywhere

by Clayton Dyck MD CCFP FCFP; Brent Kvern MD CCFP FCFP

Ten years ago, we were presented with a daunting task at a university in Southern China. A group of their faculty had been directed to provide clinical teaching to a cohort of local undergraduate medical students in that university's relatively new English stream. The catch: these faculty spoke quite limited English and were now expected to teach in this language. Our task was to present a series of faculty development workshops to help them improve their clinical English, and if we could help them with their clinical teaching skills, all the better.

Early into our first session, we realized that things weren't going anywhere. While friendly and a bright group, our "students" were nervous and extremely hesitant. We were getting no interaction or involvement, so we decided to name the elephant in the room. "You've been asked by your faculty to teach in a language other than your own," Brent said. "I can't imagine how stressful that must be!"

With this, the room seemed to melt with relief (and some tears). After spending time, almost therapeutically exploring their anxieties about what was expected of them, we had to ask the obvious: "So why do you want to do this? Why do you want to teach?"

While some of their replies were pragmatically focused on department needs, leadership expectations, and their own scholarly advancement, most of them were far more foundational and emotional. They taught because they enjoyed the energy of their students. Because the students ensured that they had to keep up to date. Because of the reward in seeing a student master new knowledge or clinical skills. Because they were helping to ensure well trained physicians were available for future generations.

Any of that sound familiar?

We realized that we were suddenly in a room of energized peers. In a moment of "teaching improv", we spent the rest of the session working out the participants' real interests and needs (bedside teaching skills and giving feedback) and used this as a framework around which some clinical English would be introduced and practiced.

The week that followed ended up being one of the most rewarding and informative teaching experiences in our careers, mainly because of the relationships we developed with our amazingly enthusiastic participants, who made huge progress in their teaching (and English!) skills. As well, our own teaching and course planning skills improved from the experience, and we developed new approaches that we could apply with our local faculty in Canada.

Since then, we've encountered these same commonalities with other global partners within the CFPC's Besroux Centre. Teachers are teachers everywhere, with attributes and values that align well with those of family physicians. As a group of "experienced peers", Canadian educators have made significant contributions in improving global health outcomes through medical education and capacity development. But it all starts with listening, recognizing, and building upon our commonalities. In return, we have also learned a great deal from our global family medicine partners. Bilaterally, the satisfaction of nurturing and mentoring learners, the joy of seeing learners progress, and sense of accomplishment that comes with doing something just outside your comfort zone are powerful connectors. In the face of increasing nationalism, we need to be reminded that global educational partnerships are a true "win-win". Sometimes, it takes a "teachable teaching moment" such as ours in China to do so!



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