EDITORIAL

The teaching role of residents: Time to come out of the closet?

El Papel Docente de los Residentes: Es Momento de Salir del Armario?

"To teach is to learn twice". 
Joseph Joubert.

"Corollary: To teach well is to learn twice as well". 
Whitman and Schwenk.

The multidimensional educational and clinical care processes in medical schools and hospitals involve many individuals, one of which is the physician resident. Medical residents have two different roles, as students of universities’ specialty programs and as healthcare professional workers employed by medical institutions and the healthcare system.1 The educational function of physicians is as old as medicine itself, but the teaching role of medical specialties’ students has been formally identified as recently as the second half of the 20th century.2 The “resident-as-teacher” (RAT) concept has evolved in the last decades and has been incorporated in several educational programs in developed countries, but its dissemination in the Latin American environment and Spanish-speaking countries has been slower, as shown by the paucity of publications related to this subject in the global medical education literature.3,4

The teaching role of residents is a fundamental component of the healthcare and educational systems in hospitals, ambulatory care centers and universities. There are many published studies that describe its basic elements, its importance in the learning process of medical students, interns and other residents, the curricular development and evaluation of RAT workshops and courses, and the educational “basic science” that underlies its educational effectiveness. These research papers have been summarized in several narrative and systematic reviews in recent years, demonstrating its educational rationale and clinical relevance.4,5-9 In the United States of America the educational role of residents has been given explicit importance by incorporating it in the mandatory accreditation programs for undergraduate and graduate medical education, diligently applied by the Liaison Committee on Medical Education and the Accreditation Council for Graduate Medical Education.10,11 Unfortunately, in a substantial proportion of the world’s medical schools and healthcare institutions there is no formal training of residents to perform their educational function more effectively, or even a conscious recognition of their important role in medical education. This is a vacuum that needs to be filled proactively, since it has been shown that RAT courses and workshops can have a substantial effect on residents’ teaching skills and students’ learning.1,12 It is necessary to promote the professional development of this facet of residents, to develop pertinent educational interventions and to design appropriate instruments to measure its impact. An important book about this theme is Janine Edwards’ “Residents’ Teaching Skills” from the Springer Series on Medical Education, that includes many clear chapters about experiences, educational methods, and assessment instruments related to this subject.13 Another useful and practical reference is Karen Mann’s “12 Tips for preparing residents as teachers”.14

The study of Bernal Bello and his team, published in this issue of Revista Clínica Española, adds relevant and needed information about the educational role of residents at the University of Alcalá and several hospitals in Spain.15 The paper analyzes medical students’ opinions about the teaching skills of residents and physician specialists, and presents important data about the resident-as-teacher situation in their University and its network of teaching hospitals. As an example, almost 70% of the students in their sample state that more than 50% of what they learned during practical training comes from the residents. This is comparable with our findings in a survey of more than 5000 residents from all specialties in Mexico’s UNAM Faculty of Medicine, where Mexican residents report that 45% of their learning comes from other residents.4 A recent qualitative study that explores what medical students learn from residents and the characteristics of excellent resident teachers, provides information that complements our observational studies and points the way for the content that should be included in RAT courses.16 Furthermore, residents’ teaching skills have
a critical function in role modeling, a complex and valued strategy that has a profound, lifelong impact on trainees’ behavior and specialty choice. Traditionally role modeling is thought of as a prerogative of elderly and prestigious teachers, but recent research suggests that residents and younger dedicated specialists have a prominent impact in this sociological construct.\textsuperscript{16,17}

It’s apparent that residents’ teaching skills are relevant for the educational process, from the point of view of medical students, residents and physician specialists. What is not as readily apparent are the reasons for the lack of dissemination of the RAT concept in our medical schools and hospitals, and the tepid institutional response to the lack of initiatives for training residents in the improvement of their teaching competencies. As the title of this Editorial emphatically states, it is time for the clinical and educational communities to explicitly sponsor resident-as-teacher activities like courses, workshops, seminars, medical education journal clubs, etc., in their local areas of influence, to promote a more balanced situation of the educational role of residents in their home institutions. These can only result in improved learning of all the relevant stakeholders, and ultimately improved clinical care.

References

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