



The Experience of Suffering

Responding as Professionals

An exploratory project for the IPTL course by

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Introduction

Participants shared two core beliefs:

- Suffering is a universal human experience.
- All healthcare professionals can and should address suffering.

Participants engaged in a series of exploratory conversations about the topic of suffering in the education of **senior nursing and medical students**. This poster explores **three themes** which arose from this dialogue.

Theme #1

What do we mean by 'suffering'?

Definitions inadequate, but shared concepts include:

- Universal
- May be hidden
- Multi-dimensional (physical, spiritual, social, cultural)
- Individual
- Affects the whole person
- Often accompanied by pain (somatic, psychic or spiritual)
- Not amenable to being 'fixed' by any technique, but requires a response of compassion

What did we learn about our concepts of suffering?

- Participants did not identify any significant differences between their concepts of suffering, though the language used varied from person to person.
- None felt that the process changed their fundamental understanding of suffering, but it did expand the range of language available to us to talk about it.

Theme #2

What barriers to addressing suffering are encountered by nurses and physicians?

In order to equip students to overcome barriers to addressing suffering, both common and discipline-specific barriers must be identified.

Common barriers:

- Lack of time
- Fatigue
- Personal fears in facing suffering



Barriers more prevalent in nursing:

- Burnout, compassion fatigue

Barriers more prevalent in medicine:

- “Hidden curriculum” in medical education
- Counterproductive effects of the educational process
- Education does not support/enhance trainees existing desire/ability to address suffering
- Lack of role models
- Not formally evaluated

Theme #3

What are the relevant learning needs of nursing and medical students?

Common learning needs:

- clinician teachers should be taught to convey - both explicitly and through example - the importance of addressing suffering
- students should learn strategies to navigate the systemic barriers to addressing suffering

Nursing Curriculum Strengths:

- the skills of compassion and care are taught and evaluated
- teaching occurs longitudinally throughout the four years of training

Medical Curriculum Needs:

- addressing suffering should be acknowledged as a component of the physician's role
- teaching strategies should emerge from this acknowledgement

A Way Forward:

- How might the nursing curriculum's strengths help address the medical curriculum's needs?

Conclusions:

Our Lessons as an IP Team

- On a small team, our perspectives and experiences as individuals are as influential as our roles as representatives of a profession.
- A common language matters: our time spent defining terms proved very useful.
- We began with certain assumptions about each other's professions: open discussion brought these forward and allowed us to reach a more accurate understanding.