



SPECIAL ARTICLE

Taking care of the health team in times of covid-19: A creative experience from Brazilian health educators



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Abstract The current COVID-19 pandemic makes us live difficult and unprecedented times and health professionals are in great demand. Thus, health teams also need to be taken care of. Not only physical care, but also mental health care. The authors describe an educational strategy developed with the objective of helping doctors, health workers and medical students to work with efficiency and serenity in their clinical settings. The strategy consists in the elaboration and dissemination of short videos with recommendations that can aid professionals having an objective view of the reality they are experiencing and so maintaining the emotional balance. The cinema, which is also included in these videos in form of film clips, is an important resource for the education of affectivity and helps to clarify the recommendations. Since it is a remote activity, even medical educators prevented from working on the front lines because they are at risk for COVID-19 can collaborate from the backstage providing a realistic view of the situation that the team is experiencing in this crisis and highlighting the positive facts and achievements. © 2020 Elsevier España, S.L.U. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

PALABRAS CLAVE

COVID-19;
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Educación de las
emociones

Cuidando del equipo de salud en tiempos de la COVID-19: Una experiencia creativa de educadores brasileños

Resumen La actual pandemia de COVID-19 nos hace vivir tiempos difíciles y sin precedentes. Los profesionales de la salud tienen una gran demanda y deben ser cuidadosos, no solo físicamente, sino también cuidar de su salud mental. Los autores describen una estrategia educativa, desarrollada con el objetivo de ayudar a los médicos, trabajadores de la salud y estudiantes

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de medicina a trabajar con eficiencia y serenidad en sus entornos clínicos. La estrategia consiste en la elaboración y difusión de videos cortos, con recomendaciones que puedan ayudar a los profesionales a tener una visión objetiva de la realidad que están viviendo y así mantener el equilibrio emocional. El cine, que también se incluye en estos videos en forma de clips de películas, es un recurso importante para la educación de la afectividad y ayuda a aclarar las recomendaciones. Dado que se trata de una actividad remota, incluso los educadores médicos a los que se les impide trabajar en primera línea, por estar en riesgo de contraer COVID-19, pueden colaborar desde los bastidores brindando una visión realista de la situación que vive el equipo, destacando los hechos y las conquistas positivas.

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What problem was addressed?

The current COVID-19 pandemic makes us live difficult and unprecedented times. The crisis we are experiencing has a double component: on the one hand, the biological threat of a new virus, with terrible consequences for the health of the population, since we are dealing with something unknown. On the other hand, anxiety, fear and disordered emotions are a threat to emotional balance and represent an obstacle to maintaining the necessary serenity to face such a challenge. Thus, day in day out, the care of the health team itself is essential. Beyond physical care, it is also necessary to pay attention to mental health. Or put more simply, it is crucial to raise the morale of those who deal daily with this threat of outstanding proportions. A discouraged, pessimistic doctor without perspective also represents an element of the crisis and such attitude causes insecurity in patients. The general/family practice, that deals with both the emotional and the scientific side of medicine, plays a central role in facing this pandemic.¹

These days, as in times of war, all health providers are being asked to do their best. An excessive and disproportionate concern for the global problems that the world is facing does not help – even hinders – health professionals to assume their own responsibilities in the specific sector they are acting every moment. To operate properly in clinical settings, it is necessary to think globally, but act locally.² Global information, which is available to anyone, being important in health policies, is not really relevant to what each health worker has to face on a daily basis. Such information can even generate an anticipated concern and, worse, distract professionals from their own responsibilities. It is possible – to adapt an old saying – that too much focus on the forest can prevent you from seeing the trees that need help.

Focusing on realism and fostering objectivity

The ideas previously exposed were consolidated from the work in clinical and educational settings carried out by general practitioners and educators who are part of SOBRAMFA – Medical Education and Humanism, a private organization located in São Paulo, Brazil. The clinical practice developed by SOBRAMFA team takes place in several nursing homes for elderly and in two community hospitals in which

chronic patients with comorbidities or in palliative care are monitored. Although in hospitals such doctors do not act specifically in caring for patients with COVID-19, which is done by infectious disease specialists and intensivists, they have the responsibility to collaborate in the management of COVID-19 in the nursing homes, which promised to be very problematic in view of the information initially received from the USA and European countries. The learning from others' experiences is propitiating best results in such scenarios. As family doctors, they still have to interact with members of the health team of hospitals to which their patients who developed COVID-19 are referred and to face a range of emotional, social and cultural issues raised in patients, families and co-workers by the disease still little known.

As pandemic progressed, it became increasingly clear that discernment, serenity and keeping the focus in the own circle of influences are required for health professionals who work on the front lines. The education of affectivity and the promotion of a realistic view of the situation that each team is experiencing in this crisis, with focus in the positive facts and achievements, could be a valuable instrument in such a situation. In this sense, even those who are prevented from acting in clinical settings because they belong to risk groups can and must join forces.

Cinema helping to cope better with emotions and feelings

The education of affectivity is especially necessary now when contradictory and negative emotions emerge from the difficult circumstances experienced. Clinical issues and ethical dilemmas are often blurred by disturbing emotions and destructive feelings: those of patients and those of the professional who cares for them. Such emotions must be transformed by reflection into experiences that generate behaviours capable of building ethical attitudes and professionalism.³ Transforming human beings requires educating their affectivity and attitudes, that is more than offering theoretical concepts or simple training; it implies promoting reflection which facilitates the discovery of oneself and allows to extract from the intimate core of the human being a commitment to improve. The cinema, which has been included in the field of medical humanities,

Table 1

Movie and IMDB reference	Comments, topics
Braveheart https://www.imdb.com/title/tt0112573/	The leader asks to wait for the right moment in time to face the burden of enemy cavalry.
Gladiator https://www.imdb.com/title/tt0172495/	I do not know what will come out of these gates, but if we are united, we will survive.
Bridge of spies https://www.imdb.com/title/tt3682448/	The healthy unconcern of the Soviet spy that contrasts with the disproportionate concern of the lawyer's son.
Spartacus https://www.imdb.com/title/tt0054331/	The union that characterizes true teamwork: I am Spartacus. He is more than a person; he is an idea that promotes solidarity.
I am legend. https://www.imdb.com/title/tt0480249/	You are not alone: feeling sense of community.
The Shawshank Redemption https://www.imdb.com/title/tt0111161/	The educated banker finds "Figaro's Wedding" record and realizes that he can't enjoy Mozart's melody in solitude.
Ladder 49 https://www.imdb.com/title/tt0349710/	Teamwork: I just told a mother that her son died, and you argue in my house! We deal with this if we stay together, we learn the lesson, and we return to the vehicle and thus honour the dead colleague.
Invictus https://www.imdb.com/title/tt1057500/	Leadership follows self-control: I am the captain of my soul; I am the lord of my destiny.
We were soldiers https://www.imdb.com/title/tt0277434/	Leading by example: Before a powerful enemy, the leader warns that he cannot promise to bring everyone back alive. But that he will be the first to set foot on the battlefield and the last to leave.
The Last Samurai https://www.imdb.com/title/tt0325710/	Leading by persistence: The final battle, an unequal struggle, against modern weapons, and the Samurai's persistence ultimately yields a tribute from the enemy who, from winner, turns into admirer.
Dead Poet Society https://www.imdb.com/title/tt0097165/	Getting on the table, to gain other perspectives on reality.
Master and Commander https://www.imdb.com/title/tt0311113/	To overcome the loss of an arm, having Admiral Nelson as role model: with one arm he led the British squad to victory
Glory https://www.imdb.com/title/tt0097441/	Everyone stays and faces the difficulties, starting with the reduced salary. In the final battle, Shaw asks for the honour of leading the attack, even though he knows that few will survive: There is more than rest in the battle. There is character, strength of heart".
Saving Private Ryan https://www.imdb.com/title/tt0120815/	Captain Miller pronounces the definitive words: James, earn this. And James every day thinks about what he said that day on the bridge: I tried to live my life the best I could. And I hope that at least at your eyes I earned what you did for me.

represents a useful resource in medical education, especially because of its role in the education of affectivity.^{4,5}

In order to promote reflection on the emotional and existential issues that have touched people during COVID-19 pandemic and based on previous experiences with cinema in medical education, SOBRAMFA team has posted short videos that are available freely to anyone who accesses its site. The link to the videos⁶ has also been sent to medical students and doctors who have participated in any of SOBRAMFA educational programs and to co-workers who interact with SOBRAMFA clinical staff in the settings mentioned above.

In the videos, a senior medical educator gives a short talk and addresses topics such as sense of community, leadership, teamwork, holding the emotions on realistic basis, communication skills, educating through example, professionalism, objectivity, realism for redeeming the circumstances, overcoming fear, keeping the focus, the pointlessness of unnecessary worries, you are not alone, and so on. These themes are developed from the context of the pandemic. The speech is interspersed with emblematic excerpts from films (movie clips), which, in turn, inspire

new comments related to the topic addressed. The films from which the clips were extracted and related comments are listed in Table 1.

Most authors have described didactic experiences with cinema in which reflection on a complete movie is promoted.⁷ The method idealized and adopted at SOBRAMFA concerns the use of several clips from different films in a single presentation, whether it be a class for undergraduate or graduate students, or a lecture for health professionals. Usually, these activities are face-to-face, which allows ample interaction with the participants. As, due to the social distancing imposed by the pandemic this is not possible, one chose to spread the videos as described.

What lessons were learned?

The objective of this action was to inspire health workers to put themselves in their own circle of influences and to focus on the particular situations they have to face in their day to day, without allowing themselves to be confused with the

bombardment of information, often contradictory, which is diffused by the media. It is about an educational strategy to encourage the acquisition of objectivity and serenity by clarifying the reality.

It is known that the combination of narrative, images and music, which characterizes cinema, is often very impactful. The use of cinema in the form of commented sequences of film clips has been an educational resource adopted for many years by SOBRAMFA educators in face-to-face presentations, with possibility of interaction between participants. Among the benefits resulting from the activity, we can mention: promotion of reflection in clinical and didactic scenarios, improvement of teaching and communication skills, development of empathy, education of affectivity, stimulation of the philosophical practice of medicine, acquisition of ethical attitudes.⁸⁻¹¹ As a result of the pandemic, this educational strategy had to be adapted to a remote format and, although a qualitative assessment has started, it is still too early to determine its effectiveness.

Nevertheless, many of the health professionals and medical students to whom the interventions were addressed gave spontaneously their feedback via social media messages and it was possible to perform an initial qualitative assessment. All texts sent represented the data source for an analysis by immersion-crystallization techniques inspired in Phenomenology-Hermeneutics.¹² After an in-depth reading of the texts, sub-themes emerged. These ones were organized into major themes such as gratitude, inspiration for day-to-day work, parallelism of videos contents with situations experienced in real life and need to search for meaning. The participants highlighted positive aspects in relation to the videos. These preliminary results are promising and certainly a more accurate data collection should be done for deepening analysis.

Anyway, many lessons were learned from these experiences, such as: creativity and flexibility are needed to overcome new challenges and even those who are prevented from acting on the front lines because they belong to risk groups can and must collaborate in times of crises. We hope that over time this pandemic and its serious consequences will fade away. We would suggest that this teaching strategy can be replicated and adapted to other situations during and after pandemic with the aim of helping doctors and medical students to a good medical practice, in which Science and Art can coexist in harmony.

Conflict of interest

The authors of this article declare no conflict of interest.

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