Insufficient Job Control among Gastroenterology Trainees: Time to Focus on the Science

To the Editor:

Nam et al.\(^1\) undertook a remarkable study highlighting job stress in the field of gastroenterology. Among their findings, they noted that fellows demonstrated insufficient job control in relation to more senior professorial colleagues.\(^1\)

The field of gastroenterology has been slow to catch up with advances in medical education. Hence, this finding is not a surprise. When we look into the science of learning and, more specifically, masterful learning, various facets are essential. Schumacher et al.\(^2\) described several including team relatedness, autonomy, and personalized learning. Even today, trainees demonstrate a lack of team relatedness and autonomy. If we as educators are true to ourselves, can we honestly admit to imparting these elements to junior members? Often, there is still a "them vs. us" culture, which hinders progression in the field.\(^3\) Furthermore, we all are aware that individuals during training achieve competency at different rates. We should recognize, therefore, the importance of personalized learning where content is tailored appropriately to needs of the individual in question and more specifically on areas they are less aware of. An additional facet of masterful learning is that of feedback—and, more importantly, the nature of feedback, delivered in a non-judgmental manner in a safe learning environment with the additional opportunity to give feedback to seniors.

If we continue to fall behind on the science of learning, we will continue to read studies that highlight job issues.

Conflicts of Interest

The author has no financial conflicts of interest.

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RESPONSE

Thank you for your interest in our study and your valuable comments.

This is the first Korean study evaluating job stress and satisfaction of endoscopic unit workers as a team. We hope this study will draw attention to job stress evaluation and management in the field of gastroenterology, even though our study population was too small to represent national endoscopic teams and analyze/adjust many cofactors affecting job stress.

We could identify major stressors of endoscopy unit workers and compare them according to the different job positions. Importantly, evaluation of job stress should not end with a temporary event. We need regular follow-up and re-evaluation of job stress and the working environment in endoscopy units. Appropriate follow-up intervals also need to be determined. More importantly, systematic interventions for managing disclosed stressors by job stress evaluation are critical, and this cannot be properly accomplished without support on both national and social levels. Individual efforts to intervene on stressors by enhancing coping strategies such as psychoeducation and meditation have a limited role and are not a fundamental solution. Some important suggestions can be found in the commentary of this article. We also propose a national survey of job stress of endoscopy units in Korea organized by an academic society such as the Society of Gastrointestinal Endoscopy.

Finally, as Dr. Neel Sharma mentioned, fellow is somewhat estranged group also in Korea. Recently, systematic improvement of educational and working environments was achieved for residents in Korean hospitals, but there is still no discussion regarding fellows. It is time to consider training and creating an educational environment that focuses on fellows. In this respect, team relatedness, autonomy, personalized learning, and feedback are important components to consider for improvement of the training system, as Dr. Sharma suggested.

Conflicts of Interest

The authors have no financial conflicts of interest.

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