

## Education for the Future: What the Residents Want

Sir:

Throughout our educational journeys, we all experience teachers who stand out from the rest. Because of different learning styles of individual residents, there may be variability in the definition of a “great” clinical teacher. This may be of particular interest when addressing gender differences in surgical training<sup>1</sup> and the gender gap in academic plastic surgery.<sup>2</sup>

After approval from the institutional review board, we performed a multi-institutional survey to analyze characteristics of clinical teachers most valued by trainees, and explored differences between several cohorts. Surveys were sent to all program directors through the American Council of Academic Plastic Surgeons listserv for distribution to residents and fellows.

We received 99 completed responses. Sixty-six respondents were men and 33 were women. Ages ranged from 26 to 40 years, and 85 percent were in an integrated training program. First, respondents were asked to rank characteristics of their teachers that were most valuable on a 1 to 5 Likert scale (where 1 = not important and 5 = very important). Results were unsurprising in that a teacher’s operative skill ranks highest on the list of importance (average, 4.89) (Table 1). The second and third ranked characteristics were teaching style (average, 4.81) and approachability of the teacher (average, 4.78). Interestingly, there was a statistically significant difference between men and women, with women valuing teaching style and approachability more than men ( $p = 0.01$  and  $p = 0.02$ ).

Next, respondents were asked to rank how an educator could “go the extra mile” to benefit trainees (Table 2). Initiation of extra didactic sessions and active participation in didactic sessions ranked highest at 2.53 and 2.55, respectively, followed by

enlisting residents to assist in writing book chapters or manuscripts (3.43). Initiation of additional didactic sessions ranked higher among women ( $p = 0.04$ ), whereas direction in clinical research ranked higher among men ( $p = 0.04$ ).

This research highlights a few important concepts. First, the definition of a “great” teacher does indeed vary by individual. There is no direct algorithm for developing great faculty educators. However, we have found important themes that can be incorporated into training programs to improve the educational experience of trainees. These themes include an overall awareness of differences in learning styles among individuals, a focus on approachability and fostering of technical skills, and regular participation in resident didactic sessions. Second, female residents value personal traits and the trainee/teacher interactions more than their male colleagues; this is a concept that has also been identified in other medical specialties. According to Pomerantz et al., women look to the teacher as an ally and tend to interpret negative feedback as an indication that they have disappointed the teacher, and are of less value.<sup>3</sup> They are more likely to be overcautious and self-critical as a whole, preferring teaching relationships to be more encouraging in nature.<sup>4,5</sup>

Although there are numerous nonquantifiable variables that help distinguish a great teacher, these findings reveal the most important characteristics from the plastic surgery trainee’s perspective. It is our hope that this information, coupled with an increased awareness of teaching and learning style differences, will help programs improve the overall educational experience for their residents.

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**Table 1. Characteristics Most Valued in a Teacher of Plastic Surgery\***

Characteristic	Listed as “Very Important” (%)	Average Rank	Men	Women	<i>p</i>
No.			66	33	
Operative skill	85.8	4.89 ± 0.35	4.83	4.91	0.31
Teaching style	82.8	4.81 ± 0.44	4.70	4.94	0.01
Approachability	79.8	4.78 ± 0.44	4.67	4.89	0.02
Patient interaction	53.5	4.42 ± 0.74	4.41	4.46	0.77
Participation in lectures	42.4	4.31 ± 0.67	4.33	4.27	0.67
Conference attendance	38.4	4.17 ± 0.86	4.17	4.18	0.94
Participation in outside activities	23.2	3.92 ± 0.85	3.91	3.94	0.87
Reputation	19.8	3.65 ± 1.09	3.67	3.61	0.76
Years in practice	18.6	3.63 ± 1.05	3.62	3.64	0.94
National connections	18.6	3.61 ± 1.12	3.55	3.73	0.45
Practice type	16.7	3.23 ± 1.25	3.41	3.15	0.33
Research background	8.8	3.39 ± 1.06	3.35	3.48	0.54
Administrative role	7.1	3.18 ± 1.00	3.24	3.06	0.35
Gender	0	1.18 ± 1.02	1.79	1.89	0.68

\*Values are averaged from 1 to 5 on a Likert-type scale.

**Table 2. Responses When Respondents Were Asked to Rank the Ways in Which a Teacher May “Go the Extra Mile” in Surgical Education\***

	Average Score (1–6)	Men	Women	<i>p</i>
Initiation of extra didactic sessions	2.53 ± 1.42	2.36 ± 1.12	2.88 ± 1.20	0.04
Active participation in conferences	2.55 ± 1.80	2.55 ± 1.76	2.55 ± 1.91	1
Enlisting residents as a chapter/manuscript coauthor	3.43 ± 1.48	3.47 ± 1.51	3.36 ± 1.43	0.73
Nomination for national committees	3.61 ± 1.66	3.64 ± 1.68	3.55 ± 1.64	0.79
Direction on clinical research	3.64 ± 1.14	3.79 ± 1.04	3.33 ± 0.98	0.04
Direction on bench research	5.21 ± 1.14	5.20 ± 1.13	5.24 ± 1.17	0.85

\*Choices were ranked from 1 to 6, with 1 being most important and 6 being least important.

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### DISCLOSURE

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