



Medical and Health Professional Education
Best Evidence Medical Education

BEME Spotlight 57

How does medical education affect empathy and compassion in medical students? A meta-ethnography: BEME Guide No. 57

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Review website

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Keywords

education environment; clinical; medicine; undergraduate; best evidence medical education

Headline conclusions

- The expression of empathy and compassion arises from the unique interaction between a medical student and a care recipient.
- Empathy and compassion are interpersonal, and authentic learning contexts are ideal for medical students' expression of empathy and compassion.
- Medical students can demonstrate empathy and compassion through active listening, understanding the patient's perspective, providing relief for discomfort, and offering kind gestures to patients.
- Students can contemplate their experiences of empathy and compassion through reflections incorporated in teaching activities.

Background and context

Empathy and compassion are imperative for the delivery of good quality patient care, and are necessary attributes for medical students. Several studies have investigated the development of empathy among medical students and residents (Batt-Rawden et al., 2013; Fernando et al. 2016; Sulzer et al. 2016); and there is a lack of understanding of how learning contexts and students' experiences affect its development (Ferreira-Valente et al. 2017). Diverse educational interventions have been used to encourage the development of empathy, compassion and respect for patients in medical students (Wear and Zarconi 2008; Batt-Rawden et al. 2013).

Review objectives

To examine medical students', educators' and patients' perceptions and experiences of what affects empathy and compassion in medical students; to understand how education affects empathy and compassion in medical students; and to provide useful information and points of consideration for medical educators and faculty developers in developing medical curricula and clinical placements.

Review methodology

Search Strategy: Searches were conducted on CINAHL, EMBASE, ERIC, PsycINFO, and PubMed from 2007 to 2017 using search terms such as 'medical undergraduate*', 'medical student*', 'medical educat*', 'empathy' and 'compassion'.

Inclusion and Exclusion Criteria: Inclusion criteria were empirical studies in English that used a qualitative design that involved students enrolled in medical undergraduate studies and engaged in initial medical training regardless of their qualifications on entry, and had a description of some form of education or teaching intervention or learning experience for the medical students. Studies on students or faculty who were from non-medical professions, therapy or healthcare therapy were excluded.

Data Extraction: Information on the publication, study design, location and setting, and the objective of the study and type of teaching activity involved was extracted. Descriptions of the experiences, attitudes and perceptions of empathy and compassion were also extracted from the papers for data analysis as were key concepts and ideas (Noblit and Hare 1988). Descriptions of students', patients', family members', and educators' experiences of empathy and compassion were also extracted from each paper and categorized into 'First order constructs' and 'Second order constructs' (Cahill et al. 2018). Data were extracted by at least two reviewers from each of the 33 papers, and the quality of the papers were assessed based on CASP criteria (CASP 2014).

Data Synthesis: The seven steps by Noblit and Hare (1988) were used for data synthesis. A line-of-argument synthesis was used to integrate the similarities and differences among the studies to produce a new conceptual model of our interpretation of the findings. We had several discussions to clarify the key concepts and meanings identified, and to collaboratively create these interpretations (Cahill et al. 2018).

Implications for practice

- Provide students with opportunities to interact with a wide and diverse range of patients in different settings.
- Approaches such as creative writing and discussing films are complementary to, and not a substitute for, other more patient-focussed opportunities.
- Students should have opportunities to observe desirable expressions of empathy and compassion in authentic learning contexts, and to share their views in a reflective space with open dialogue.
- Educators should consider learners' professional priorities, emphasize the interpersonal nature of empathy, and encourage students to be genuinely interested in patients.

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