

## HOW CAN WE DESIGN A CURRICULUM FOR A RESILIENT MEDICAL STUDENT? - A BLUEPRINT FOR RESILIENCY PROGRAMS FOR MED STUDENTS IN JAPAN

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**R**ecent research around the world has consistently reported that medical students experience a high rate of psychological morbidity, depersonalization, and low personal accomplishment. Resilience-enhancing programs have been proposed and implemented even in Japan. However, most of them remain extracurricular programs that are not specifically tailored to medical students. Additionally, they mostly mimic resiliency programs in North America, although studies have indicated that cultural perspective to the self, others, and context contribute to the capacity to respond to a stressful situation.

In this context, the presenters investigated what factors might affect the similarities or differences in the perceptions of resilience among experienced palliative care physicians in Canada and Japan in 2017-2018 in order to propose a theory for a resiliency curriculum from a different cultural perspective. This study showed that Japanese physicians are more likely to rely on “Relationships” with other persons such as

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mentors, family, friends, or colleagues; in contrast, Canadian physicians tended to be more focused on individual factors such as “Autonomy” and “Confidence”.

As a result, Showa University School of Medicine in Japan has developed a progressively advancing resiliency program for first through fourth year medical students as part of a new curriculum, implementation of which will begin in the spring of 2020. This represents one of the largest revisions in the school's history.

In this presentation, a blueprint for resiliency programs in a new curriculum will be presented, including course description, course content, educational objectives, learning resources, timetables, and instructional strategies. ■