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Spark Podcast

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Dr. Teresa Chan (00:22):

Welcome to the MacPFD Spark podcast. This is a podcast that focuses on helping you develop your career as a faculty member. Our goal is to spark your enthusiasm and passion in one of our four main pillars of development: creativity and humanism, scholarly practice, leadership, and, of course, teaching and supervision. Throughout this podcast, we're aiming to bring you insightful and inspiring conversations that spark your interests and open up your mind in new ways to grow as a faculty member. Okay. Have we sparked your interests, yet? Let's get started with this month's episode.

Hello, everyone. Welcome back to MacPFD Spark. As always, I have two really amazing guests that I wanted to tell you about and the first is Dr. Robert Fleisig. He's been on the show before and we brought him back for a second episode that's going to focus a little bit more on the idea of creativity and where that belongs in this house of healthcare, and also more specifically how it might help us look towards the future and find solutions for some of the problems we have.

And then secondly, I'd like to welcome in a new guest to the show, Dr. Emma Apatu and Emma is someone who's been doing some amazing work around public health. Something that's at the front of minds for many of us these days and she's going to be talking a little bit about their public health program that they have here, the MPH program, that we're very proud of here in the Faculty of Health Sciences. So, listen up.

Hello, everyone. I'm back with my friend, Robert Fleisig. He's been on this podcast before and so you might know he's a engineering prof with really heavy interest in design thinking, but design thinking is a really creative thing and so I brought him back to have a great conversation with me about creativity and where it belongs in academia and specifically in the health sciences because he's been doing a lot of stuff that intersects with what we do. He's been partnering with hospitals like St. Joseph's Healthcare in Hamilton, and I thought that he could just kind of talk to us a little bit about creativity and why we need it. Robert, take it away.

Dr. Robert Fleisig (02:12):

Thank you, Teresa. There's so much to say on this subject.

Dr. Teresa Chan (2:16):

Oh, my gosh, definitely.

Dr. Robert Fleisig (2:18):

And my thinking and understanding over the years has changed tremendously.

Dr. Teresa Chan (02:23):

Okay.

Dr. Robert Fleisig (02:24):

But, one of the key things that I've learned over the last few years is thinking about creativity not as a point in time or an event, but rather as a way of thinking or what's sometimes called a mindset. So, going through and working with people in a creative mindset and being creative not just here or there, but it's something that is almost like a state of mind and it's not [inaudible 00:02:47] to set aside or usurp your other ways of thinking? I mean, I'm trained as an engineer and engineering researcher. You're trained as a medical doctor. And we have ways that we've learned through our professional development, our professional training, and education, but this sort of works on top of that.

Dr. Teresa Chan (03:06):

Okay.

Dr. Robert Fleisig (03:07):

And the creativity, especially the way we do it in design thinking, is really a creativity around human experience and what that kind of does is human experience is something that's common to all of us. It's something that we share. It doesn't belong to anyone, doesn't belong to any discipline, and so if we can all talk about human experience in a creative way, we have a common way of looking at things in a common language and a common way of working together.

Dr. Teresa Chan (03:30):

Yeah. I love it. It really fosters that interdisciplinarity that for the researchers they are all saying, you want on your grants, that for the clinicians that you want in the spaces, right, like to be able to involve architects or engineers or even the IT people because that's really where we need them about the user experience. I think that really, really helps. So, I love that idea. It makes me remind me of like being a mindset. I read a book about...something called creative confidence, was the new name of the title of the book. Can you speak a little bit about that concept? Because I mean, I love the book. It's by two brothers who do design thinking kind of founded or rekindled the discipline and maybe made it more mainstream, but I really like that idea of book's title. Can you speak to that a little bit?

Dr. Robert Fleisig (04:14):

Creative confidence is very much related to creative mindsets and thinking, and it's a set of, if you like, skills and capabilities, that you can develop as a creative individual, that help you be more creative, help you be a bit of a design thinker. So, some of those are really kind of odd learnings, if you like. So, for example, one of the things that we teach students is, and this is a learning outcome, is how to navigate in ambiguity. So, we're especially trained in the STEM fields as trying to eliminate risk and ambiguity as quickly as possible, but in a creative space, we want people to stay and actually stew in the ambiguity for a while to actually be comfortable with it and to use it as an opportunity for exploration and not simply for decision making.

And so this is a very tough thing to learn and it goes against the grain for many of us that really are so good at going the other way of kind of converging on solutions and not just not playing with things. I want people who are learning, how to design and how to be a bit more creative. We want to start learning how to play with the ideas, how to enjoy that, how not to worry about where it's going to end up, but look for that Aha moment, that insight, the great connection that you can make by both working with people and thinking in particular ways.

Dr. Teresa Chan (05:33):

All right. So that's a really succinct way to think about it. And so where does creativity belong in kind of our jobs as faculty? Like where do you see it fitting?

Dr. Robert Fleisig (05:41):

So, so many places. I mean, obviously for us as a faculty in our educational roles, there's plenty of room for creativity first of all in the classroom creating more positive student experiences without in any way of playing down or losing on the educational side of things, and I think as faculty, we're unusually privileged. We have tremendous latitude for what we can do as faculty and access to tremendous resources if we ask and ask the right way, and I think there is just huge opportunity for us as faculty to do things that other people simply couldn't, to take on new initiatives, to try new things and to share those with our colleagues, who are interested and willing, and to build communities. I think things like community building is essentially at its very heart a very creative practice. We're trying to find ways of engaging other people in new experiences that benefit them and us and really are centered around the growth of us as professionals and individuals.

Dr. Teresa Chan (06:46):

Yeah. I think it really helps us, especially in today's [inaudible 00:06:49]. I mean, we're recording this during the pandemic. The Black Life Matters movement is abreast. The Me Too movement is kind of still resonating with us. I think that all those movements kind of really have come to bear kind of the inequities and the perspectives that maybe sometimes were not privileged and like we're so privileged that we didn't actually take into count. So, I think the design thinking can also be an answer to a lot of those problems. We call them wicked problems, right? They're so big that it's hard to wrap your head around them and because it's so big, just give up and say, "I'm not going to even try," but I think that when you center around one person's experience and then think about another person's experience, that's a lot more tangible, and I think that's where design and creativity and all that stuff could really center us on the people that are the end of rather than seeing this giant system.

Dr. Robert Fleisig (07:41):

Yeah. It's really one of the things we teach is something called the childlike mindset. When we go into a situation where perhaps we're trying to learn about what, let's say, patients currently experience. We want to go in there without our blinders and our biases and our prejudices, trying to set those aside and try to learn about the situation, the people, the context, what they think, and what they feel with without the blinders on and that's actually hard to learn, but it can be incredibly insightful and valuable in developing new and creative solutions.

Dr. Teresa Chan (08:15):

Yeah. I mean, I think, I don't know, like that five year old kid that used to be daring and just paint anything, sing anything, right? Like I think that's where that comes from, is that reminding us of that person who didn't worry that there were...there were lines of suggestions on the coloring book, but you have to really color inside them. I was that kid that colored inside them, for sure, but like my brother would be all over the place. He would definitely break every rule in the household at times, and I feel like that's a creative genius that we lose as we come into [crosstalk 00:08:46] and as we raise ourselves in academia, because there's more and more rules and more and more regulations and can I really say this or that or do this or that.

Dr. Robert Fleisig (08:54):

We're really trained well to take a look at data and get the data to tell us something and design thinking is almost sort of the opposite. It's to take a look at a situation and imagine what isn't there to ask the what-if question to push beyond what's accepted and what perhaps even logical and try to challenge by asking what we sometimes call an abductive questions. What if we did it this way? What if we looked at it? What if we changed that and see where that takes us? The essence of creativity is asking what-if question, the abductive question, taking where you haven't been before, rather than letting the data lead us to something we want. So, my students like to ask, they kind of go, "oh, we're going to build something for someone, let's go ask them what they want." I go back to them and say, "what I want to train them is to not to ask the people what they want, but you want to go in and talk to the people and understand what their deepest desires are and design for that" and that's a much less direct route and a lot more difficult, but it gets down to something much more fundamental about who we are and designing something that is much more valuable because we have a deeper understanding of the people we're creating for.

Dr. Teresa Chan (10:01):

The tradition of design thinking when I've mapped them back, they come from the architects, anthropologists, sociologists, people coming from some of the disciplines that you and I may not have encountered very much during our training, but that are essential to understanding how the world works, right? There is some really, really cool work that's done by having someone just follow along a team. One of my friends and colleagues who's just finished her residency now, Eve Purdy, she's a doc at Queen's University and she went to do master's in anthropology for that exact reason because there's so much you can do from observing and doing those ethnographic studies to really understand, and she's really [inaudible 00:10:39] it into the operation SIM world where they're just doing some really cool stuff. She's going to be doing a fellowship in Australia to really do that more, but she's written some papers.

She's definitely worth checking out if you are clinician and want to know how this kind of all plays out, but definitely like she's my archetype for people who might bring those worlds together and really come at this from a qualitative lens to take that data even though it's not in the hierarchy of evidence and it's not numbers, doesn't mean that it can't tell us something very useful about the human experience. And I think design thinking gives us a structure and a disciplined approach to take that data that we might not otherwise use and use it in a very structured, rigorous way because design thinking has its process and it has its rules in the same way a systematic review or an RCT has its rules and it has it's regulations. So, I think that it gives you some of that structure back that you need when you're diving into the space for the first time.

Dr. Robert Fleisig (11:37):

I think that really exciting thing here is bringing together people with deep technical and disciplinary expertise in a creative way through design thinking. Again, one is not meant to supplant the other. The whole idea here is to use design thinking to bring together the knowledge we have in new and creative ways and I think that's where the magic is.

Dr. Teresa Chan (11:57):

Yeah, definitely, and you need that confidence in your creative self. Maybe you have to rediscover that inner kid. Maybe you have to do other things, but it definitely worthwhile trying, because I think this gets you out of yourself, and I think sometimes we have the high drama of the way that we see the world. Just really diving deep into someone else's perspective, whether it's through a narrative medicine workshop, or maybe this is more functional for some people, as it's more tangible to understand what it means to be a patient in your clinic. It might be to understand what the journey is or a visitor who comes to visit the hospital, but can't right now because of restrictions, et cetera, etc cetera.

How can we, how might we, like you said, redesign those experiences and make them just a little bit better for those people and then do it again and do it again and think through systems that then actually can respond to the call to arms. Be the systems we need because they are literally built with everyone in mind, but everyone [inaudible 00:12:56] one more groups of people at a time, right? I think that's a really cool way to go through life, is to get out of your own head and start trying to understand and empathize with others.

Dr. Robert Fleisig (13:08):

That's the essence of it, yes.

Dr. Teresa Chan (13:10):

Thank you so much for sharing your thoughts and you got a lot, like my mind is just racing right now, and I'm sure a lot of other listeners are doing the same thing. So, thank you so much for flowing the lines again.

Dr. Robert Fleisig (13:21):

You're welcome. It was my pleasure.

Dr. Teresa Chan (13:23):

Till next time. Wow. That was a really awesome first segment of the MacPFD Spark Podcast and now onto our second segment.

Dr. Teresa Chan (13:37):

Hello, everyone. My name is Teresa Chan and I'm here with a new friend of mine, but she's a rising star in the Faculty of Health Sciences. Her name is Dr. Emma Apatu. Say hi, Emma.

Dr. Emma Apatu (13:46):

Hi, all.

Dr. Teresa Chan (13:47):

All right. So, Emma is the Director of the Masters of Public Health program and she is just a phenomenal thinker and just a creative educator and I thought I bring out the show to just have a chat with her about her process of designing things because she's been starting up our master's program here basically from the ground up. Right, Emma?

Dr. Emma Apatu (14:09):

First, thank you Teresa for that really nice introduction. I really love all the work that you're doing with faculty development. So, the MPH program at McMaster is approximately five years old and I've come in to help move the program to its next phase of excellence.

Dr. Teresa Chan (14:28):

All right. So, you didn't start it up, but you are kind of like the natural first kind of successor to try to like move it into the stratosphere, let's say.

Dr. Emma Apatu (14:37):

Exactly.

Dr. Teresa Chan (14:38):

All right. Okay, cool. So, that's good. That means that you had one predecessor that kind of like carved it out, and now you're kind of like moving it on. That's great.

Dr. Emma Apatu (14:46):

Dr. Fran Scott, an amazing local public health practitioner, she launched the program.

Dr. Teresa Chan (14:53):

So, it sounds like you got handed over a pretty solid program that you're hoping to make even better. What have you been doing to try to take hold of what's been done before and then how do you decide when you're going to make the next step of improving something or if you keep it the way it's supposed to be?

Dr. Emma Apatu (15:09):

So, yeah, the program here, it's fantastic, and one of the major reasons is our faculty. So, we have core faculty that passionately teach in the program as well as lead large research programs around life course epidemiology. Dr. Anderson does a lot of amazing work in that area. Dr. Liz Alvarez does amazing international policy and interdisciplinary public health work. So, working with such great faculty, I try to listen to them to hear about what's working and what's not. In addition are students, right? They're one of our most important stakeholders and they provide a lot of great feedback. So, when I came in, I did a lot of engagement activities with those stakeholders. In addition, we brought in an external stakeholder from the Boston School of Public Health, who gave us some really neat ideas around the new mission and vision for our program, and we're currently in the phase where we are building out our program to follow that mission and vision.

Dr. Teresa Chan (16:21):

Well, that's interesting, right? Like the idea of having a mission and vision for your program. I think that not everyone always has the luxury of the time to do that, especially programs that maybe you have an application cycle that's very rapid, but it sounds like it's been useful for you to have those touch points and touchstones to try to figure out how to go forward. Is that why you're doing it? Or what does it give you? Like if you're trying to talk to people who haven't done that in a while or ever, why would someone want to do that?

Dr. Emma Apatu (16:50):

Yeah. So, a number of health-related programs have accrediting bodies or guidance from some sort of maybe federal levels. So, for us in Canada, we try to follow guidance from the Public Health Agency of Canada. And in that guidance, they mentioned that MPH program should have a mission. So, we're a generous program. That's what we've been approved for. So, we stick with that, but our mission, our new mission now centers around preparing future public health leaders to identify and employ evidence-informed thinking to solving emerging and pressing health challenges locally, nationally, internationally in meaningful, responsible, and equitable ways. So, this mission is very powerful. It helps to set the tone for new programming. It also helps us in our discussions around the development of new goals and objectives for the program and especially, during this time of a pandemic, we've seen so many issues been uncovered, right? And this mission statement helps us figure out like what our place is, in terms of training public health leaders.

Dr. Teresa Chan (18:03):

Yeah. I think that right now public health is kind of one of those really hot topics. My specialty, which is in emergency medicine, had a TV show in 90s about it, and so everyone wanted be an emergency doctor for a while, but like right now, everyone I think wants to be a public health officer because it's become the new thing, right? So, anyway, but to be honest, I think it's quite interesting to see the evolution of this field, especially since we finally clued in that's so important, right? So, yeah, I think that it'll be really interesting to see where public health goes in the next bit. So, what are some of your thoughts for the future of education in this realm? In my mind, there are some trends that I'm seeing. I'm seeing more and more people who already have an MD going back and doing a master's of public health.

I'm seeing more and more professionalization of certain kind of like research work, such as like the HRM or the MPH programs, being away for people to gain those research skills. What do you see being the role of kind of like a master's level public health program being in the house of...like all of the work that we do. Where does it fit?

Dr. Emma Apatu (19:13):

Yeah, I think you're totally right. Public health, actually, I would say many, many years ago a lot of folks probably would've said, what is public health, right? A lot of folks now are obviously attuned to it and I think public health will be at the forefront of many discussions at various levels, moving forward. As such, we're going to have to think about training programs and graduate level training is going to be really important, right? In responding to what the needs are. I think we're going to see and we're seeing it already in a lot of technological shifts, right? So, I think we're going to need folks that can use data to model, make predictions around certain disease outcomes and situations. We're going to need folks in the medical profession that can look at things at the public health lens. So, I just think that the field is just going to grow even more.

Dr. Teresa Chan (20:18):

Yeah, I think so and I think that we're looking at public health, maybe needing to also look different now, right? I think we're realizing this especially with pandemics and things like that, you can't just, how can I put it? We can't just expect like a flyer or a poster on a wall to have efficacy now. I think the world has changed so much with the advent of everything from TikTok all the way through to definitely Twitter, like a lot of the docs, that's where they're getting their information, a lot of the politicians, that's where they are getting their information and people, right? If you want 20 somethings to wear mask, you probably need to be hitting TikTok and Instagram and Snapchat and not Twitter or LinkedIn or emailing people because it's probably not working, right? So, it's going to be interesting to see the evolution of that going forward.

Dr. Emma Apatu (21:02):

Totally agree, and in our MPH program, we have professional development studio series, and in that series, the first part learners learn about evidence-informed decision making, project management, and communication. Learners understand how to craft various messaging for different modes of technology. I think that's going to be really important and in another one of our program strength and our department as a whole is knowledge translation and policy and research methods. So, I think our program is... I'm really excited about our future.

Speaker 1 (21:41):

Oh, that's really cool. So, what you're saying is that like your traditional grad school programming, you're augmenting it with, I guess, grad student development, kind of like we do faculty development. You're kind of like pre faculty development maybe we'll call it. It sounds like that's what you're doing, right? Like you're unpacking behind the scenes work that makes science work and the jobs that we do work and doing that on the side.

Dr. Emma Apatu (22:05):

Yeah. You ask the question about where's public health going to be in the future with respect to other health professions and with all programs in Canada at least are pretty much online, and I think moving forward, we're really going to have to prove our value to our students and I think what that is going to be is jobs. Does your program really make us ready for the workforce? Like, yeah, in a perfect world, like technically yes, the program should, but we are really making sure that our program will prepare students for jobs in the future.

Dr. Teresa Chan (22:46):

Yes, for sure. I mean, I think that's going to be interesting, right, because as there is the media, it's going to be interesting to see how we train people, the new workforce, right? Like, I didn't know...I needed to learn how to do podcasting, but low here we are, right? I do think that the skills are evolving and things are constantly changing. So, I think having some flexibility in a curriculum, whether it's a residency curriculum, a nursing curriculum, faculty level kind of orientation to it, how can we carve out time for people to do that continuous professional development? That's not the usual content expertise and then learning the skills that you need to survive in the new world. I think we're probably all cycling around the same thing. So, it's really, really cool what you're doing because I think that I'll pay more attention and steal from your playbook.

Dr. Emma Apatu (23:31):

We all know you have a wide one, so definitely peeking it.

Dr. Teresa Chan (23:34):

It's all good. We can cross pollinate. We can link up. I think that's going to be the other part of it too. Is that how do we close some of the silos, right? How do we actually reach out and say, "hey, the libraries are redoing this stuff? Do you have to do it too? Or should we just link up and cross promote? And I think that's going to be a huge game changer as we carve ourselves forward. Right? So, obviously if you're interested in any of the stuff that we're doing, your students are a 100% our future faculty. So, they should jump online and come to [inaudible 00:24:02] free content. We always welcome learners to our events. Sometimes we even have them co-design the events with us and sometimes they're speakers in our events and definitely they're totally allowed to come and just hang out with us because it's a cool thing to do at least that's what I hope they think.

But, yeah, if it's a topic that you love and you're [inaudible 00:24:21] listen to this podcast, like obviously it's not a faculty only podcast, we love that you're interested in this work and maybe someday you'll be amongst our ranks. So, we're happy to invest in you now. We're happy to have you watch any of our web content because it's the right thing to do. It's out there in the world and we're a 100% happy if you show up to our events and want to learn alongside your faculty members. So, definitely, unless there's a restriction based on like sometimes there's certain program in this only for certain kinds of faculty or certain groups of faculty like program directors and stuff like that. Obviously, don't come to those because we might not let you in, but for any of the other open content from MacPFD content, you're generally welcome. So, pass that along to your students and, any of the educators listening, pass that along to your students because yeah, I think we all grow better if we learn together.

Dr. Emma Apatu (25:06):

Yeah and, again, thank you for being so open and receptive, like thinking of innovative ways to not only connect with faculty, but also students as well. I know that our students have reached out to your office around virtual conference planning, right? So, I really like how you're creating this community of support, which is great.

Dr. Teresa Chan (25:26):

Yeah and it's not just me. It's like everyone else, I think, is coming together. We just needed a place and space and maybe COVID-19 to force us all to actually start collaborating. So, it's been interesting to see as people start connecting and finding those synergies. It's been really interesting to see all of our work evolve. So, kudos to you for doing a great job at taking your program to the next level and continue to share all your secrets with the world and I love that you were able to come on the podcast with us today.

Dr. Emma Apatu (25:57):

Oh, you're welcome, Teresa. This has been great.

Dr. Teresa Chan (26:01):

Thank you so much for tuning in to the MacPFD Spark Podcast. Just so you know, this podcast has been brought to you by the McMaster Faculty of Health Sciences and specifically the Office of Continuing Professional Development and the Program for Faculty Development. If you're interested

in finding out more about what we can offer for faculty development check out our website at www.macpfd.ca that's www.M-A-C-P-F-D.ca. Many of our events are actually web events that are free. Finally, I'd like to thank our sound engineer Mr. Nick Hoskin who has been an amazing asset to our team, thanks so much Nick for all that you do. And also thank you to Scott Holmes for supplying us the music that you've been listening to. All right. So until next time this is MacPFD Spark signing off.