

Adversity Quotient in neurosurgical training

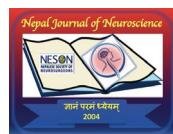
Amit Thapa MCh¹

¹Department of Neurological Surgery, Kathmandu Medical College Teaching Hospital (KMCTH), Sinamangal, Kathmandu, Nepal

Date of submission: 10th July 2020

Date of acceptance: 20th July 2020

Date of publication: 12th August 2020



Key words: Adversity Quotient, Education, Neurosurgical training

"Strength does not come from winning. Your struggles develop your strengths. When you go through hardships and decide not to surrender, that is strength."

Mahatma Gandhi

Adversity Quotient: just another measure?

Modern education system around the world is based on training to acquire knowledge and skills. How much a student gains largely depends upon his Intelligent Quotient (IQ). As IQ is not the only factor to determine success in life, some institutions have tried to assess their potential candidates by Emotional Quotient (EQ). As we build our career, we try to develop our Spiritual Quotient (SQ) by behaving with wisdom and compassion while maintaining inner and outer peace. However, we remain largely unaware of our Adversity Quotient (AQ), an index which actually measures how an individual faces and deals with unpleasant situations so common in neurosurgical practice and present-day competitive world. Over 1500 researches from over 100 universities and institutions globally have supported its role.^{1,2} The leaders and successful people

have uniformly displayed the highest AQ! If IQ measures one's capability, EQ measures the will, SQ the purpose then AQ measures one's response to adversity.

What does it measure and how?

Adversity Quotient (AQ), by measuring one's capability to deal with adversities in life, evaluates his ability to convert the obstacles into opportunities. This science of resilience reliably predicts an individual's success in real life. This term was first coined by Dr Paul Stoltz in 1997 in his book "Adversity Quotient: turning obstacles into opportunities".³ During a challenging situation, we use our intelligence, emotions and social prowess to deal with the problem, however it is our AQ which navigates our overall response.

To quantify the adversity quotient, Stoltz developed an assessment method called the Adversity Response Profile (ARP). AQ involves CO₂RE dimensions which stands for C= Control, Or= Origin, Ow= Ownership, R= Reach and E= Endurance. "Control" measures to what level we can manipulate the condition; "Ownership" decides what level we play in making it superior; "Origin" judges who the origin of the adversity was; "Reach" accounts for the effect of the problem in our life or work when out of control and "Endurance" decides how long the adversity can be tolerated by us. One can get an insight by attempting to answer different life events which can be evaluated on CO₂RE dimension. Based upon AQ, an individual can be categorised into a Quitter (who walks out of a problem), Campers (delighted individuals who are fully gratified in doing rather being encouraged for inspiration) and Climbers (who enjoy their life effusively, are persistent, tenacious and resilient). Climbers aim for higher Maslow's hierarchy of needs.^{3,4,5}

Is AQ modifiable?

People mature through their experiences. The lesson learned during exposures help one to build upon his resilience and develop upon his option finding abilities. The present rise in suicides due to the so-called

Access this article online

Website: <https://www.nepjol.info/index.php/NJN>



DOI: <https://doi.org/10.3126/njn.v17i2.30109>

HOW TO CITE

Thapa A. Adversity Quotient in neurosurgical training. NJNS. 2020;17(2):1-3

¹ORCID iD: <https://orcid.org/0000-0003-1896-3115>

Address for correspondence:

Professor Amit Thapa
Head of Department, Department of Neurological Surgery
Kathmandu Medical College Teaching Hospital (KMCTH)
Sinamangal, Kathmandu, Nepal
Contact number: +977 9851177995
E-mail: dramithapa@yahoo.com

Copyright © 2020 Nepalese Society of Neurosurgeons (NESON)

ISSN: 1813-1948 (Print), 1813-1956 (Online)

This work is licensed under a Creative Commons Attribution-Non Commercial 4.0 International License.

failures in personal, social or professional life tell about rising inadequacy in handling rejections and accepting shortcomings. Modern times day-to-day stress demands integration and application of grit and resilience.

By training, AQ can be permanently rewired and improved, for substantial gains. Customised programs are now available. Groups that complete AQ programs have been shown to improve their AQs 11–23% on average.^{3,4,5}

Why in neurosurgery?

“Training to be a polished neurosurgeon is like being baked in a 1000 °F furnace, the more heat you face the better you become”, I remember how late Prof Upendra Prasad Devkota taught his residents. Trainees may face many problems related to academia, home environment, dealings with peers, emotional, intellectual and social issues which can further result in drop-out of course, aversion to the speciality, loss of willingness to excel, acquisition of dreadful habits, violence, anxiety, depression, suicide etc. Hence, program directors should consider evaluating AQ of the potential trainees before accepting them for the course.

As they get trained in the art, the programs should facilitate their trainees with courses to enhance their AQ. AQ helps trainees to use creative and logical reasoning to learn difficult subjects, increase performances, use diverse learning environment as an opportunity, improve conceptual understanding, encourage to face hardship boosting their confidence level and utilizing failures to generate opportunity and eventually attain self-actualisation to achieve success in life.^{1,2,6}

The professional stress continues even after training, as the craft demands to be ever in-alert and immediate on-job availability, putting one’s social and personal life into the backseat. “As you become a neurosurgeon, you get married to the passion, all others then become a second priority!”

Living like a neurosurgeon is like battling desperate situations while dealing with complications happening to the patients or breaking bad news to their loved ones. Despite of the best efforts and following standard of care, you may be occasionally blamed for unacceptable results. The professional stress soon becomes personal when it is further compounded by the negative broadcast by media and social media shares.

In such situations neither your IQ, EQ nor SQ helps. Such happenings are not unreal and require a tough mental framework to come out as a winner. AQ training improves one’s performance, innovation, agility, resilience, change, pace, problem solving, optimism, energy and morality.^{1,6,7}

Why is it so important now?

Point prevalence of mental illness is 10% but this COVID-19 pandemic may push it two to three times higher because of various reasons like isolation, quarantine, loss of relationship, loss of loved ones, loss of work, financial hardship and family problems creating a possibility of “mental health pandemic”. Surveys have shown that depression is becoming prevalent in neurosurgeons, hence we have to change gears and use our innate trait to become a “five-star doctor”.⁸

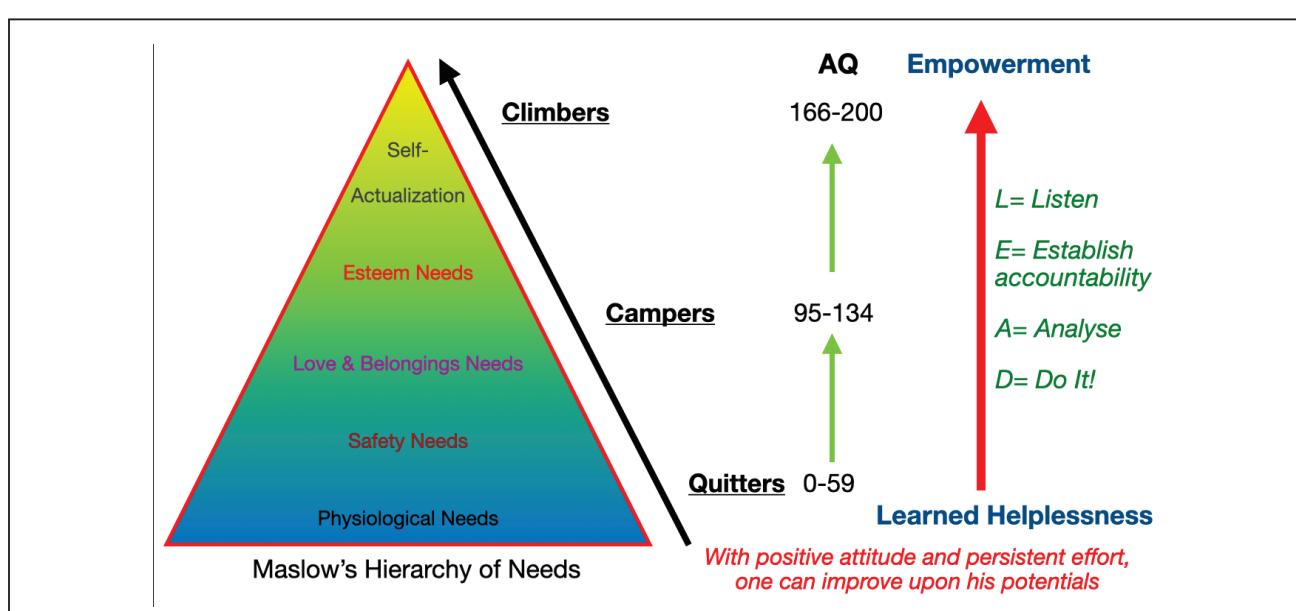


Figure 1: Characteristics of Adversity Quotient (AQ)

How to improve AQ?

Cognitive psychology, neurophysiology and psychoneuroimmunology which are the building blocks of AQ, can be enhanced. As with any conditioning, training can help.

LEAD sequence helps to rewire, raise and strengthen our AQ. “L” is to listen to our adversity response, “E” is to establish accountability, “A” is to analyse our options and “D” is to do the necessary action.³

AQ can be improved by learning to be a:

1. Detective, identifying one aspect of problem you can influence if not control
2. Lawyer, try proving who says “nothing can be done” wrong
3. Judge, giving impartial assessment for your lack of control
4. Pioneer, taking responsibility, declaring accountability and planned action
5. Opportunist, picking outcomes which definitely happen
6. Firefighter, hosing down emotional bushfires
7. Surgeon, clamping bleeders and removing damaged tissues, preventing its effect on other areas of life, business and relationships
8. Visionary, imagining life beyond the adversity
9. Accountant, creating a balance sheet of what and what not you can control and their implications
10. Catalyst, taking even the smallest constructive action to regain control

Life teaches!

Life trains us to handle failures. We should realize if we have achieved everything, there is a chance to lose everything, nobody knows when the next crisis will hit us personally or the world at large. “Success is an awful teacher and Failure teaches you more.”

Learn how “money works” instead of “how to work only for money”. Try to find passion in life and learn practical skills.

It may appear that we live in physical houses, but the reality is we live in our ‘MIND’ which is an unlimited area. Life is great when things are sorted and uncluttered there. Keeping the mind messy with growing hatred, piling up regrets in a corner, boiling expectations, stuffed secrets and littered worries, ruins this real home.

The key factor to performing well in life and in every arena, is the ability to control the quality and quantity of your “internal dialogue”. Performance is potential minus internal interference. Live in peace, not in pieces.

To conclude

Adversity Quotient is both a science and an art. It tests one’s sincerity, determination and perseverance through experimentation to lead for success. It has an innate natural ethic and aesthetic component which blossoms with practice. If IQ measures “capability”, EQ “will”, SP “purpose” then AQ measures and trains “response to adversity”. It is high time we evaluate and develop upon our trainees’ AQ to help them succeed in life. This shall help not only an individual but also the whole organization as a “team”.

Conflict of Interest: None

Source(s) of support: None

References

1. Mali P, Zahyah H. Relationship between Adversity Quotient and Learning Behaviour among Fourth Year Students at Songkhla Rajabhat University. *International Proceedings of Economics Development & Research.* 2013; 66:27. <https://doi.org/10.7763/IPEDR>
2. Dorji R, Singh K. Role of Adversity Quotient in Learning. *International Journal of Education.* 2019; 11:119-25. <http://ijoe.vidyapublications.com>
3. Stoltz PG. Adversity quotient: Turning obstacles into opportunities. New York: Wiley; 1997. ISBN 978-0471344131
4. Stoltz PG. Adversity Quotient at Work: Make Everyday Challenges the Key to Your Success - Putting the Principles of AQ Into Action. William Morrow; 2000. ISBN 978-0688177591
5. Stoltz PG. Adversity Quotient at Work: Finding Your Hidden Capacity for Getting Things Done. Collins; 2001. ASIN: B000W25NPI
6. Cornista GA, Macasaet CJ. Adversity Quotient and achievement motivation of selected third year and fourth year psychology students of De La Salle Lipa AY 2012-2013 [Doctoral dissertation, Thesis]. The Faculty of the College of Education, Arts, and Sciences De La Salle Lipa; 2013.
7. Johnson MB. Optimism, adversity, and performance: comparing explanatory style and AQ [Doctoral dissertation]. San Jose State University; 2005.
8. Thapa A. COVID-19 and the role of neurosurgeons in Nepal. *World Neurosurgery.* 2020. <https://doi.org/10.1016/j.wneu.2020.05.093>