COVID-19 and continuing professional development: an opportunity for inclusion

It is said that “necessity is the mother of invention,” and for all its disruption, the COVID-19 pandemic has highlighted innovation, problem-solving and creativeness in all spheres of our professional and personal lives. Innovation in continuing professional development (CPD) in ophthalmology was no exception; indeed, the emergence of a global novel virus only increased the urgency for timely and relevant CPD. The travel restrictions and strict health and safety guidelines set in March 2020 resulted in a tremendous shift in the way we normally accessed CPD. Traditionally, for many of us, the COS Annual Meeting was not only a way to fulfill many of our maintenance of certification requirements, but also to engage with our professional community. When the pandemic hit mere months before our 2020 Annual Meeting, rather than scrapping the event entirely, we rapidly switched to a digital platform. This was no mean feat, given that we had limited experience on that front. The transition to digital conferencing was enthusiastically embraced by the ophthalmology community, with registration matching or exceeding the typical registration numbers of in-person attendees. A direct comparison of the numbers in 2019 reflect how our community adapted to this new format in 2020: total registrants: 947 (vs. 925 in 2019); and total number who logged in: 751 (vs. 629 who checked in in 2019). The evaluation response rate (i.e., the percentage of people who actually completed an evaluation) almost doubled in 2020 (49% vs. 27% in 2019).

There are always unintended consequences with major paradigm shifts—some positive and some negative. As Kisilevsky and colleagues describe in their article in this issue, one of positive unintended consequences they observed in their department was improved access to continuing medical education (CME). Interestingly, the authors comment not only on practical access, such as ability to participate through the removal of travel or financial barriers, but also a more subtle form of access that opens the door to those who historically may have been disadvantaged in the traditional setting. Specifically, they point to the fact that in the traditional conference setting “presentations are rigidly timed with a limited question period and the exchange of ideas oftentimes occurs in personal conversations, rendering these insightful exchanges available to only a select few. In contrast, the virtual webinar features a concurrent chat that allows participants to pose questions openly and anonymously with the speaker and among participants, opening the exchange of ideas to all attendees.” They point out that groups that have historically been underrepresented in the traditional CME format include women, parents with young children, individuals with limited funding or financial support, and people living in remote locations where travel logistics, costs and limited or no department coverage create significant barriers to in-person attendance. Moreover, the intimidation factor of walking to the mic in a huge plenary room and questioning or challenging a renowned expert undoubtedly also discourages some participants from venturing forward. These same individuals, however, may be more comfortable with the chat feature in a webcast. The move to digital formats has thus balanced attendance at conferences by making them more accessible to a wider and more diverse audience, those with limited financial means or those who live far from areas that are traditional conference hubs. Virtual conferences could also offer the possibility of broader audience participation in question-and-answer sessions, for example, by permitting the audience to vote on questions in real time, thus elevating the quality of the scientific discourse, and greater response in evaluating the conference.

Plans for the COS 2021 meeting are being formulated as the global COVID-19 situation continues to develop, and keeping a positive mindset towards virtual interactions will be essential. Has COVID-19 spelled the death of the in-person conference? Certainly not. However smoothly an online meeting may run, a hard-to-capture, missing ingredient is the vibe set by real-life interactions. There is the anticipation of the release of the results of a landmark trial as you try to find a seat in a packed room. There is the pleasure of reconnecting with your mentors and fellow residents and colleagues. There is fun in participating in a social event with your friends from around the country and catching up on life outside of ophthalmology. Online platforms simply cannot replicate these experiences. The lack of a physical audience deprives speakers also of the ability to “read the room” and tailor their talk to the listeners’ reactions or engage with them more directly.

Humans are social beings and thrive with direct interactions, so in-person meetings are bound to start again when it is safe to hold them. However, that does not mean we should discount the success and wide accessibility of digital conferencing. With the pandemic still unabated, it is hard to envision an exclusive return to physical conferences, with hundreds of people travelling to spend days together in closed auditoria, strolling around poster sessions and sharing food and drink while discussing ophthalmology. In the meantime, as Kisilevsky and colleagues state, the pandemic “has created a unique opportunity for virtual education allowing for a broader and more diverse audience, increased participation, and enhanced access to traditionally marginalized groups…” and “has proven that this is a viable framework and created the opportunity to change the way medical education in ophthalmology is created and consumed. We should not let this opportunity pass.” Let’s embrace the change and look forward to getting together virtually for the 2021 COS annual meeting!
“The world as we have created it is a process of our thinking. It cannot be changed without changing our thinking.”
- Albert Einstein

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