

Medical Student Reflective Writing

Gast-Beitrag für die zweite Ausgabe von *in weiß* von **Johanna Shapiro, Ph.D.**

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Medicine is what the educator and thinker Donald Schon¹ called a practice profession, a profession in which the purpose of academic preparation and skill development is to apply this training in a real-world environment whose focus is some form of human service (e.g., education, architecture). Practice professions are by definition action-oriented and functional, rather than speculative and philosophical. They emphasize doing rather than being, tangible (often measurable) effects and outcomes rather than elusive and at times indescribable processes. As such, practice professions, including medicine, seem to have little use for reflection. Yet considering how dense and profound medical education is on a daily basis, it is essential that medical students learn to make space in their lives to reflect on their

experience and the experiences of their patients; and through reflection, to deepen their understanding of what these experiences mean, and what they can learn from them.

Writing is a particularly effective way of reflecting. Although more research is needed, writing appears to organize and make sense of our chaotic ruminations and confused feelings about complex or difficult events². Writing allows us to go more deeply – and perhaps more critically and curiously – into our experience and the experiences of others. In writing, we ask first, what happened? Then, perhaps, is that what really happened? We might also ask, what else was happening while I was paying attention to what I thought was happening? And most importantly, what

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did this event mean to me – and others – initially? What does it mean to me – and others – now? What can I learn from this experience about myself and others and society? Such writing produces what have been called “narratives of rethinking.”³

Just as in the 20th century, patients began to feel the need to tell their own stories, to reclaim their voices from “colonization” of the medical community, so too have physicians begun telling stories about their patients, themselves, and all the complex threads that hold them together. In the U.S., Canada, the UK, and some European countries, medical education has incorporated

medical student writing about patients (and themselves) as a valuable method to help learners challenge facile assumptions about the nature of doctoring, think more deeply

about patients and themselves in relation to their patients, become more aware of the importance of their own and patients’ emotions, and to make sense of morally ambiguous or complex situations^{4,5}. The meaning of these encounters is usually better discovered in writing using subjective personal terms, rather than formal essays or case studies.⁶

1 Schon D. The reflective practitioner: How professionals think in action. Basic Books: New York, 1984.

2 J. W. Pennebaker JW. Telling stories: The health benefits of narrative. J Clin Psychol. 1999; 55:1243–1254.

3 Wear D, Zarconi J, Garden R, Jones T. Reflection in/and writing: pedagogy and practice in medical education. Acad Med 2012;87:603-9.

4 Wald HS, Borkan J, Scott-Taylor J, Anthony D, Reis SP. Fostering and evaluating reflective capacity in medical education: developing the REFLECT rubric for assessing reflective writing. Acad Med 2012;87:41-50

5 Mann K, Gordon J, MacLeod A. Reflection and reflective practice in health professions education: a systematic review.. Adv Health Sci Educ Theory Pract 2009;14:595-621.

6 Peterkin A, Roberts M, Kavanaugh L, Havey T. Narrative means to professional ends. Can Fam Physician. 2012;58:e563-9.

For medical students, such writing can take many forms and serve many purposes⁷. It can be primarily an act of disciplined self-reflection, in which students reflect on what it means to them personally to become a doctor; how they are changing and growing, what they want to hold on to, and what they're afraid they're losing. Rather than simply venting, they have to probe themselves deeply and honestly, in relation not only to their patients, but to the larger social structures in which they are embedded, sometimes discovering hard truths the knowledge of which may nevertheless cause them to be better physicians.

Medical students at times feel that in the process of becoming physicians, they can lose themselves^{8,9}. Reflective writing can be a way to find their unique voice and reclaim their individuality. Through writing, students reconnect with aspects and attributes of themselves which they thought hidden or discarded, and recognize how these qualities can actually enhance the way they intend to practice medicine.

Reflective writing also provides students with an opportunity for cultivating empathy through curiosity and imaginative thinking. Practices such as point-of-view writing¹⁰ can develop perspective-taking and improved understanding of others. Students who engage in point of view writing learn to appreciate patients' priorities and perceptions, even those of patients they have labeled difficult or demanding. As well, a synergistic process seems to occur between writing-related empathy and imaginative thinking. The student begins by asking the question, what is going on with this patient, why does she behave as she does? Answers emerge, based in part on remembered comments or gestures, but also on imagined possibilities. This deeper understanding and insight may then lead to innovative ideas about how to approach a similar patient in the future or how to be more present with this patient in a follow-up visit.

7 Shapiro J, Kasman D, Shafer A. Words and wards: a model of reflective writing and its uses in medical education. *J Med Humanit* 2006;227:231-44.

8 Jennings ML. Medical student burnout: interdisciplinary exploration and analysis. *J Med Humanit* 2009;30:253-269.

9 Kaiser R. Fixing identity by denying uniqueness: an analysis of professional identity in medicine. *J Med Humanit* 2002;23:95-109.

10 Charon R. *Narrative medicine: Honoring the stories of illness*. New York: Oxford University Press, 2006.

Some students report that, through reflective writing, they become more aware both of the ways in which they use words as well as the language of others. In committing their experience to paper (or iPad), they might ask themselves, "Why did I choose a medical term when explaining this diagnosis to my patient?" "What made me write about this patient in the third person?" As students ponder the words they use, their intended and unintended meanings, they notice that when the words are shared with others, they don't always have the intended effect. "That statement wasn't meant to be funny!" They explore metaphor as a way of conveying hard-to-grasp experiences. They begin to wonder, why did a patient use a certain word to describe his pain? Why did another patient pause so long before answering a particular question? What was said, why it was said as it was, and what was elided from the communication suddenly become of significance.

Writing also makes students more sensitive to plot, foreshadowing, climax, and denouement¹¹. They see for themselves medical sociologist's Arthur Franks' typologies of pathography¹²: stories of chaos, of restitution, of quest and witnessing. They see how a story can be conceptualized in different ways, how the same story can be viewed as having a happy or a tragic ending, depending on which components are presented. They learn how telling one kind of story can have a devastating effect on a patient ("My life's been worthless, and now I'm going to die"), and how another can help them make peace ("I've led a pretty good life, and although I'm scared, I'm ready to die").

One aspect of student writing appears to be about self-healing¹³. Students tend to write about difficult, painful, or memorable patient encounters. These are often situations that troubled or distressed them, although conversely they are sometimes situations that brought them great joy. In the former case, students seek resolution, letting go of pain, and forgiveness of self and other (whether a difficult patient or an unkind resi-

11 Charon R. *Narrative and medicine*. *NEJM* 2004;350:862-864.

12 Frank AW. *The wounded storyteller: Body, illness, and ethics*. Chicago: University of Chicago Press, 1995.

13 Nevalainen MK, Mantyranta T, Pitkala KH. Facing uncertainty as a medical student: A qualitative study of their reflective learning diaries and writings on specific themes during the first clinical year. *Patient Educ Couns*. 2010;78:218-23.

dent or attending). Although the act of writing doesn't "change" external circumstances, students frequently report feeling better after engaging in reflective writing. In the latter case, students attempt to commemorate an event that seems to embody all that is best and noble about medicine. The meta-message of this kind of writing seems to be, "Don't forget that you have just witnessed an incredible human drama. This is why you want to be a doctor."

Through the process of writing, students often report they achieve a kind of emotional equilibrium. By spending time reflecting on a difficult experience, then by attempting to craft it poetically or creatively in such a way that best captures the "essence" of the experience, they discover that sometimes their initial anger, frustration, disillusionment, while not necessarily disappearing, becomes more tempered with compassion, insight, and acceptance. Similarly, students sometimes say they are able to be "fully present" with a challenging clinical situation as they write about it. Whereas at the time, a given situation was too uncomfortable for them, and they wished only to avoid it, as they sit with it in the creative process their fear or discomfort diminishes, and they are able to look deeply at all aspects of the event. Thus, they become more connected to the event itself, to their patient, and to the other people involved.

Finally, although writing has been criticized as a solipsistic, self-indulgent exercise that ignores larger social forces, in fact it can be considered a form of social activism, a way of bringing to light moral injustice.¹⁴ Through writing, students begin to question the normative assumptions and practice of medicine, and those of the larger society in which it is embedded. By asking themselves whether they agree or disagree with the conventional wisdom surrounding this profession, they begin to consider what position they wish to adopt in relationship to the medical establishment (e.g., rebel, apologist etc.). Reflective writing can shine a light on the biases and inequalities that pervade the healthcare system; and in doing so, demand a response. Making their writing public fosters a remarkable connection and solidarity with others, both patients and others in the medical community. This experience of solidarity helps

14 Cohn FG, Shapiro J, Lie DA, Boker J, Stephens F, Leung LA. Interpreting values conflicts experienced by obstetrics-gynecology clerkship students using reflective writing. *Acad Med.* 2009;84:587-96.

students to reassert their commitment to the suffering other and in the process stand against individual and systemic moral wrongdoing.¹⁵

In the writing that follows, we easily identify many of these themes. The students represented here "in weiß" wrestle with what it means to practice medicine across cultures. They explore the different viewpoints of patient and medical student. They reflect on their feelings in clinical encounters, and the relationship of these feelings to their interactions with patients. Some projects question accepted conventions and norms, and challenge the reader's complacency about homelessness or hospital routines. In these essays, point-of-view writing, poems, and comics we see that, regardless of their country of origin, medical students wrestle with similar issues, albeit through the particular lens of culture and background. Hearing these voices should give us all hope in the next generation of physicians. Above all, we should encourage them to keep writing so that they can bring the full dimensionality of their personhood to the practice of medicine.

15 Coulehan J. Compassionate solidarity: Suffering, poetry, and medicine. *Perspect Biol Med* 2009;52:585-603.

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Zur Anwendung der Technik des „reflective writing“ im Medizinstudium hat sie zahlreiche Fachartikel veröffentlicht.



Kindergarten Pitana Alta, Ecuador

Das rauhe Klima und die Armut hinterlassen ihre Spuren an den Kindern des abgeschiedenen Bergdorfes: Dicke Mandeln, rauhe aufgesprungene Haut, Schupfennasen. Und trotzdem sind es die gute Stimmung und das Lachen, die uns als Erstes auffallen, als wir den Kindergarten betreten.

Lena Heindl & Thomas Volckmann