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Incorporating Reflective Writing into the Clerkship

During the last decade, medical schools have turned to writing exercises as a means for encouraging students to reflect on their learning experiences during clinical clerkships. The reasons for the increased popularity of reflective writing are broad. To some extent, the interest grows out of the movement to broaden curricula beyond strictly biomedical topics. Interest in issues such as humanism, professionalism, medical sociology, and medical humanities lend themselves to exploration through reflective writing. There also has been a growing interest in the study of literature in medicine, another focus closely related to reflective writing. Through reading literature, students can learn about the lives of their patients and thereby recognize the power and implications of their actions (1).

Until recently, most “non-biomedical” courses were offered during the preclinical years. Some schools have established discussion groups in which topics outside the usual arena of clinical training are discussed. At some institutions, these discussions are highly structured with assigned groups and formal reading lists (2). Other medical schools ask students to reflect on their experiences, either specifically or generally. These reflections tend to take the form of written prose, but some are in the form of poetry or other artistic methods (3-6). The introduction of reflective writing into the clinical clerkship is part of this trend.

Approaches to encouraging reflective writing are quite varied. Recently, three internal medicine clerkships (University of Chicago Pritzker School of Medicine, University of Florida College of Medicine, and University of Massachusetts Medical School) independently implemented reflective writing activities in the clerkship curriculum (7). The assignments given at these institutions are non-specific. For example, the University of Florida College of Medicine asks students to:

“Pick something that particularly affected you, whether for good or bad, and briefly describe it. Then provide some reflection on why you think it affected you and whether it will change your practice of medicine.”

The University of Chicago Pritzker School of Medicine asks students:

“At some time during the next three months, I would like you to choose a topic from your experience on this rotation and write about it. You can write about anything. You could write about a case that taught you something medically. You could write about your relationship with a patient, about a patient’s response to disease, or about your interaction with your team. Really, anything.”

The reflections can be stand-alone assignments or part of a student’s educational portfolio. At the University of Massachusetts Medical School, the reflective exercise is vertically integrated—students are given the same reflective assignment in each of the first three years of medical school.

Approaches to disseminating the reflective pieces are also quite varied. A single clerkship director can read the reflections, calling on students who expressed interest in discussing the issues further or

For example, many students write about their own development both as a person and a physician. Comments such as “I was about to actually do something that would improve the quality of my patient’s life” are common. When students see themselves being changed by their experiences, they are often amazed: “I was a part of an incredibly trying, intimate, and real event in these people’s lives, and I was welcomed in even though I was a complete stranger... I feel guilty being invigorated by such experiences, but at the same time feel appropriate in allowing them to teach me a deeper appreciation of life.”

Students often write about experiencing a patient’s death, an event that stimulates particularly poignant reflections. Standard themes, such as helplessness, sorrow, loss, and the “good death,” are frequently reiterated. However, the wide variety of personal experiences that impact how young men and women, on the road to becoming physicians, come to terms with the loss of patients are equally evident.



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whose topics need follow-up (frequently, students write about medical errors or student mistreatment). The institution can put aside time for the authors to read their reflections to a small group composed of students and a faculty facilitator. In addition, anonymous reflections can be shared with school and hospital administration for program evaluation and improvement. Institutions may also present student writing in other forums, either informally or through publication. Several books of collected student writing have been published (8, 9).

Students often demonstrate a great ability to capture the essence of the art of medicine in writing. In analyzing student prose, students find a number of themes important and write about these issues frequently.

Much has been written about the clinical experiences that shape a student’s professional behavior (10). Reflections on this topic show how students work to blend the humanism that brought them into the medical field with the pressures of workload and acculturation. Reflections, such as this one about the housestaff—“Somewhere along the way, the pressure and incredible demands of their job replaced their ability to effectively care for their patients on a personal level”—provoke both worry for the educational system and hope for the future of the students who recognize these tensions.

Reflections on medical errors can be troubling: “In my time on service at least one, if not multiple, incident reports could have been written every day for things that needed to happen but didn’t or things that shouldn’t have happened but did.” Without reflective writing exercises, medical instructors may not know of the uncomfortable positions students are placed in and would not be given the chance to resolve the problem.

Two other common topics encountered through student reflection are the inability to help some patients and communication, or miscommunication, between doctors, patients, and other members of the health care team. Student insights into the workings of the health care system are very interesting as they tend to look with fresh, often skeptical eyes at what seasoned physicians accept as standard.

The degree to which programs offer feedback and evaluation to their students about their writing is also varied. While most institutions with reflective writing programs have faculty review the work, few give direct feedback to every student. Rather, group sessions during which reflections are read provide an opportunity for the writers to receive feedback and support from peers and faculty. Efforts at evaluating the writings have been difficult. The challenge is to find a mechanism that maintains the personal spirit of reflective writing while still being a valid and reliable evaluation tool.

Student opinions of reflective exercises have been overwhelmingly positive. At University of Florida College of Medicine, University of Chicago Pritzker School of Medicine, and University of Massachusetts Medical School, students rank the exercise high in end-of-clerkship evaluations and often say it is the

most valuable aspect of portfolio assignments. “The most valuable part of the portfolio is having to reflect on the clerkship—not just about the patients that were seen, but on how this affected me. I did not realize how much this clerkship changed my views of medicine or myself.”

Implementing reflective writing assignments into clinical clerkships is straightforward with the major investment of faculty time related to reading and evaluating assignments. The opportunity for students to be creative and the benefits of an exercise that enhances professional growth and development far outweigh the cost of increased faculty time. The contents of the reflections may also guide faculty in structuring future curricula to better prepare students for clinical training or address frequent problem areas exposed by the contents of the reflections.

The purpose of developing a reflective writing program is to encourage students to consider some of the powerful experiences that occur during early clinical training. Although many students may engage in this type of reflection independently, formalizing the approach might persuade students to spend more time and energy on the practice as well as encourage students disinclined to this type of reflection to engage in it. ✨

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