

Reflection

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Intended Learning Outcomes

- Understand the domain of “attitude” as it applies to health professions education
- Describe ways to foster the learner’s growth and development within this affective domain

What is 'affect' or 'attitude'?

- Beliefs
- Judgments
- Understandings
- Views
- Values
- Professionalism
- Respect
- Opinion
- Emotion
- Evaluation

Relationship to Health Professions

- We have our individual beliefs, values, and understandings
 - Formed by our circumstances and world-views
 - May not be at all similar or familiar to those of our patients/clients
- How do we help our learners make sense of these differences?

Cognitive Dissonance

- Individuals prefer their thinking, beliefs, and understandings to be consistent and in sync
- When confronted with conflicting ideas or beliefs, individuals become uncomfortable
- This dissonance stimulates some sort of change to re-establish equilibrium

The purpose of affective ILOs

- Growth, development, or maturation of our learner
- Creating normative behaviors or skills
 - “compassionate care”
- Habits of mind or patterns of reasoning

Rebalancing Dissonance

- Thinking versus behavior
- Who's "truth" ???
 - ?socio-political dimensions
 - ?economic dimensions
- Agreed upon professional standards

Teaching, Guiding, Supporting

- Sense making of dissonant or difficult things
- Role of reflection
 - Deepen understandings
 - Engage emotional understanding
 - Process complex events
 - Challenge own assumptions

Reflection to:

- Stimulate learning or self-regulated learning
 - Metacognitive requirements
- Develop good therapeutic relationships with patients/clients
- Develop professional or expert practice
 - Create ‘illness scripts’
 - Kolb’s experiential learning cycle

Sandars. The use of reflection in medical education, AMEE Guide No. 44

Pedagogical strategies

- Telling stories
 - Patient experiences
 - Exemplars
 - Sub-standard performers
- Creating learning portfolios
- Writing journals
- Engaging in artistic expression