

Narrative Writing as Reflective Practice: Its Therapeutic Relevance

Dr. Kshitiz Upadhyay Dhungel

Abstract

Reflection refers to an activity or process in which our lived experience is recalled, considered, and critically evaluated. Reflective practice is an increasingly accepted methodology for professional development. Such practice develops an ability of continuous learning while creatively applying current and past experiences along with reasoning to unfamiliar events as they occur. Reflective practice helps doctors to maintain their professional competence on existing knowledge, attitude and behavior. Narrative writing, in this regard, is one of the several ways of reflective practice in which practitioners regularly write reflections about their situation, thought, and action.

The reflective practice, also known as ‘Narrative medicine’, has been widely used in medical field. Such practice of narrative medicine can lead to produce more ‘humane’ doctors who can improve the treatment satisfaction in both, the doctors and patients. Hence, narrative writings can improve the treatment and increase the professional competence of the doctors.

Keywords: Reflective Practice, Narrative Writing, Narrative Medicine, Narrative

Reflective practice: an Introduction

Reflection or “critical reflection” refers to an activity or process in which an experience is recalled, considered, and evaluated (Richards, 2010). Moon defines reflective practice as “a set of abilities and skills, to indicate the taking of a critical stance, an orientation to problem solving or state of mind” (as cited in Hinnet, 2002, pp 5). The theory of reflective practice is attributed primarily to Donald Schon, whose work is based on the study in wide range of professionals. He argues that formal theory acquired through professional preparation is often not useful to the solution of the real life “messy, indeterminate” (Kaufman, 2003) problems of practice. Most of the event in professional life is unexpected events or surprises, which may trigger two kinds of reflections. The first, “reflection in action,” occurs immediately. It is the ability to learn and develop continually by creatively applying current and past experiences and reasoning to unfamiliar events while they are occurring. The second, “reflection on action,” occurs later. It is a process of thinking back on what happened in a past situation, what may have contributed to the unexpected event, whether the actions taken were appropriate, and how this situation may affect future practice (Kaufman, 2003).

Reflective practice as means to develop professionals:

Reflective practice is an increasingly accepted methodology for professional development. There is much agreement in the literature that reflective practices are critically important in an ongoing learning of professionals. Therefore, it has been extensively used in the West and developed world by educators, medical and nursing professionals, managers and other professionals for their own professional growth (Chivers, 2003; Clouder, 2000; Gnawali, 2008; Greenall, 2004; Levine, Kern, & Wright, 2008). Reflection involves thinking explicitly on thought, experience, or action and has profound implications for medical education (Epstein & Hundert, 2002, Levine, Kern, & Wright, 2008).

When we speak of 'reflective practitioners' we are referring to adult learners who are engaged in some kind of activity (often professional) which they can use to reflect on their strengths, weaknesses, values and areas for development (UK Centre for Legal Education, 2010). Reflective practice in which an individual will critically think about a thought, experience, or action represents a means to increase self-awareness and professional competence. This has also been used as a part of different professionals training (Gnawali, 2008, Levine, Kern, & Wright, 2008, Butani et. al., 2017). Increasing self-awareness means to understand their own feelings, values, prejudices, and methods of relating, influences how they react to situation and decision they make (Epstein & Hundert, 2002).

Reflective learning is shown to occur at different levels. Betts (2004) identified the levels as: recording, responding, relating, reasoning and reconstructing. Each level shows the gradual movement of the practitioners from surface to deep learning. Deep learning is taking place where students: display understanding of why things have occurred; connect events with feelings, emotions and actions; explore the relationship between theory and practice; and apply previous learning (Betts, 2004; cited in Stewart, Keegan, & Stevens, 2008). Reflection in professional practice, gives back not what it is, but what *might* be, an improvement on the original (Cowan, 1999; cited in UK Centre for Legal Education, 2010). The importance of reflecting on what you are doing, as part of the learning process, has been emphasized by many investigators. There is much agreement in the literature that reflective practices are critically important in the development of professional and ongoing learning of professionals (Chivers, 2003; Clouder, 2000; Gnawali, 2008; Greenall, 2004; Levine, Kern, & Wright, 2008, Butani et. al., 2017).

Narrative writing as reflective practice:

Narrative writing is one of the several ways of reflective practice in which the practitioners will write reflection in regular or interval basis about their situation, their action and thoughts. Writing about ones' reflection on critical

and powerful situations might help to explore ones emotions and reactions related to those particular experiences. Such reflective practice allows critical observation of self and makes them think what they would have done (Levine, Kern, & Wright, 2008).

Narrative writing belongs to the second type of reflection ie. 'Reflection on action' as described by Schon. Narratives as a reflective writing is used as one of the tools of Reflective practice. Bolton (2001) clarifies the role of narrative writing as a tool of reflective practice by stating:

'Reflective practice through writing is a way of expressing and exploring our own and others stories: crafting and shaping them to help us understand and develop. These stories or narrative writing are data banks of skill, knowledge and experiences. This emphasizes the role of narrative writing as a reflective practice.' (p. 13)

Reflective writing as narratives is a response to past experience and involves conscious recall and examination of the experience as a basis for evaluation and decision-making and as a source for planning and action (Richards, 2010). Reflection involves thinking explicitly on thought, experience, or action and has profound implications in medical education too. (Levine, Kern, & Wright, 2008).

As different departments in medical institution struggle with provider burnout and feelings of being overwhelmed and disconnected, strategies like a reflective writing may be a means to improve support and inspire clinicians and learners to feel fulfilled (Veno, Silk & Savageau, 2016). Reflective writing (narratives) in medicine allows for the opportunity to analyze, interpret, and learn from clinical experiences. Reflection through narratives has become an important tool for physicians and other medical practitioners (Murphy, Franz & Schlaerth, 2018, Veno, Silk & Savageau, 2016).

Narrative practice in medicine:

Truly speaking, the entire medical practice is about narrative practices. The patient comes to the doctor with complain about their health. He narrates why s/he is there to see doctors. If proper communication takes place between them, only then the doctors will come to the probable diagnosis and with some laboratory investigations and appropriate communication with some experts, he will come to the confirmed diagnosis and will be able to reply the patients narrative query like: ‘What is wrong with me?’, ‘Why did this happen to me?’ and so on.

Medicine is completely a professional course. A professional is one who is categorizing or conforming to the technical or ethical measures of a profession. A doctor must have knowledge, skill, self-confidence, and commitment to service; even so, just owning these features will not make him a professional doctor. S/he is the one who has to deal with the life of patients. S/he may be on continuous stress in his/her work. One mistake can cost a life of a patient. Sometimes s/he has to take very tough and quick clinical decisions. They often have to act by tacit knowledge (intuition, pattern recognition) (Charon, 2001a). Through reflective practice, they can develop such professional competence. So, it is always good for a professional like doctors to be reflective practitioners.

In west or in developed world, there is a practice of writing medical fiction, novels, autobiographies etc. by medical doctors. In those writings they express their problems, interesting experiences, and their weakness as human and as a doctor, their failures, and learning process (Charon, 2001b). They share their relationship with patients, patient parties, fellow workers, other health professionals, with the society and even with themselves (as doctor and self). By this act, they are reflecting and sharing their thoughts to others so that others (doctors, medical students, junior and even seniors) and they themselves can learn something from those narrative writings.

Self-reflection through narrative writing enables physicians to think critically on thoughts, events, experiences which may in turn help them to listen attentively to patients' distress, recognize their own errors, refine their technical skills, make evidence-based decisions, and clarify their values so that they can act with compassion, technical competence, presence, and insight (Epstein, 1999). This practice helps ones to construct professional competence on existing knowledge, attitude and behavior. Reflection involves thinking explicitly on thought, experience, or action and has profound implications for medical education (Levine, Kern, & Wright, 2008).

As discussed in Wlodarsky and Walters (2007), reflective thinking and teaching have also been defined as metacognition or self-monitoring based on cognitive-meditational theories of learning. Metacognition is "thinking about one's own thinking," and relates to this study of reflection as the researchers have attempted to operationalize the internal thought processes and external experiences which collectively become or contribute to "metacognition."

Doctor has sometimes problem in their life regarding their personnel life and their professional life. Sometimes they are compelled to choose the decision that may not be good as professional. If they are able to present that in free style then they really know what exactly they want from their life. And they may know that the decision was wrong and may correct next time. This can be achieved by practicing writing narratives. This may lead to personnel growth and professional competence.

The day-to day activity of doctors not only includes dealing with patient, but also carrying out researches, teaching juniors and students and interacting with colleagues. It is only with narrative competence that treatment possible, research proceeds, teaching succeeds, clinical collegueship achieves its goals, and the profession of medicine remains grounded in its timeless, selfless

commitment to health (Charon, 2001b). Narrative competence and reflection can be enhanced by practicing narrative writing. Narrative writing which is a reflective practice can improve the treatment and increase the professional competence of the doctors.

Narrative medicine a new field in medicine:

Realizing the importance of narrative writing and reflective practice, Columbia University have started an MD and PhD courses in narrative medicine. Professor Dr. Rita Charon is the founder of that department (Greenhalgh, 1999; BMJ, 1999). According to Charon (2001), Narrative medicine is just an addition of art (of narration) into medicine. Practice of narrative medicine can lead to produce more ‘humane’ doctors. She feels that narrative medicine is not the opposite of evidence based medicine: rather it’s an essential accompaniment (Charon, 2001). This field includes writing exercises of medical training, stories from practice, medical fiction, the lay exposition and medical autobiography. Narrative practices prompt deeper reflection and encouraged practitioners to reconsider priorities and values, such practice enhanced self-awareness and emotional outlet, provides motivation to improve, increases awareness of progress over time. (Rachel 2008). Charon. R (2001a, 2001b) has described narrative medicine as medicine practiced with narrative competence. Narrative competence means competence that human beings use to absorb, interpret and respond to the stories. Such practice enables the physician to practice medicine with empathy and professionalism.

Very few universities have used this narrative medicine as a part of medicine curriculum but it is gaining popularity day by day. Whosoever have practiced narrative medicine believe that this field will emerge as a new forms in which practitioners will examine, reflect on and enact ongoing commitment to patients (Butani, 2017, Charon, 2001a, Charon, 2001a, Murphy, Franz & Schlaerth, 2018, Veno, Silk & Savageau, 2016).

Conclusion

Narrative writing has been used to develop reflection and self-awareness in different professions. It is a form of reflective practice which has been extensively used as one of the tools for professional development and career growth in different professions such as teacher, nurses, doctors, and managers. Narrative writing as a reflective practice can improve the treatment, and increase the professional competence of the doctors. Therefore, reflective practice now-a-days has been used a new field in medicine: 'Narrative medicine'. Practice of narrative medicine can lead to produce more 'humane' doctors which can improve the treatment satisfaction among doctors and patients.

Author:

Dr. Kshitiz Upadhyay Dhungel is a Professor at the Department of Integrated Basic Medical Sciences, Janaki Medical College, Janakpur, Nepal. Correspondance email: kistiz2003@gmail.com

References

- BMJ Editor's choice. (1999). Ethics & narrative. *British Medical Journal* 1999; 318.
- Bolton, G. (2001). *Reflective practice: Writing and professional development*. Paul Chapman Publishing.
- Butani L., Bannister SL, Rubin A., Forbes KL. (2017). How Educators Conceptualize and Teach Reflective Practice: A Survey of North American Pediatric Medical Educators. *Academic Pediatrics*, 17(3), 303-309.
- Charon R. (2001a). Narrative Medicine: Form, Function, and Ethics. *Annals of Int. Med*, 134 (1), 83-87.
- Charon R. (2001b). The patient-physician relationship- Narrative medicine: a model for empathy, reflection, profession, and trust. *Journal of American Medical Association* ; 286(15):1897-902. Doi : 10.1001/ jama. 286. 15.1897.

- Chivers, G. (2003). Utilising reflective practice interviews in professional development. *Journal of European industrial training*, 27(1), 5-15.
- Clouder, L. (2000). Reflective Practice in Physiotherapy Education: a critical conversation. *Studies in Higher Education*, 25(2), 211-223.
- Epstein, R. M., & Hundert, E. M. (2002). Defining and Assessing Professional Competence. *Journal of the American Medical Association*, 287(2), 226-235
- Gnawali, L. (2008). Teacher Development through Reflective Practice. *Journal of Education and Research*, 1, 69-71.
<https://doi.org/10.3126/jer.v1i0.7953>
- Greenall, P. (2004). Managerial Process: the reflective Practitioner. *International Journal of Health Care Quality Assurance incorporating Leadership in Health Services*, 17 (3), viii-xii.
- Greenhalgh T., Hurwitz B., (1999). Narrative medicine; Why study narrative. *British Medical Journal*, 318,48-50.
- Hinett, K. (2002). *Developing Reflective Practice in Legal Education* (T. Varnava, Ed.). UK Centre for Legal Education and Author.
- Kaufman, D. M. (2003). ABC of learning and teaching in medicine: Applying educational theory in practice. *British Medical Journal*, 326, 213-17.
- Levine, R. B., Kern, D. E., & Wright, S. M. (2008). The Impact of prompted narrative writing during internship on reflective practice: a qualitative study. *Advance in Health science education*, 13, 723-733.
- Murphy J. W., Franz B. A., Schlaerth C. (2018). The Role of Reflection in Narrative Medicine. *Journal of Medical Education Curriculum Development*, 5, 2382120518785301. Published 2018 Jul 20.
doi:10.1177/2382120518785301.
- Rachel B, Levine, DE, Kern, Scott M, Wright. The impact of prompted narrative writing during internship on reflective practice: a qualitative study. *Adv in health Sci Educ* 2008; 13: 723-733.
- Richards, J. C. (Back article). Towards Reflective Teaching. *The teacher trainer* . Retrieved 15 June, 2010 from

[http://www.tttjournal.co.uk/uploads/File/back_articles/Towards Reflective Teaching.pdf](http://www.tttjournal.co.uk/uploads/File/back_articles/Towards_Reflective_Teaching.pdf)

- Stewart, J., Keegan, A., & Stevens, P. (2008). Postgraduate education to support organisation change: a reflection on reflection. *Journal of European Industrial training*, 32 (5), 347-358.
- Veno M., Silk H., Savageau J. (2016). Sullivan K. Evaluating our strategy for including reflection in medical education and practice. *Family Medicine*, 48. 300–304.
- Wlodarsky, R. L., & Walters, H. (2007). The Event Path for Professional Reflection: The Nature and Characteristics of Practice Among Teacher Education Faculty. *Journal of Cognitive Affective Learning*, 4(1). Retrieved 15 June, 2010 from <http://www.jcal.emory.edu/viewarticle.php?id=89&layout=html>