

Patient interviews, students writings

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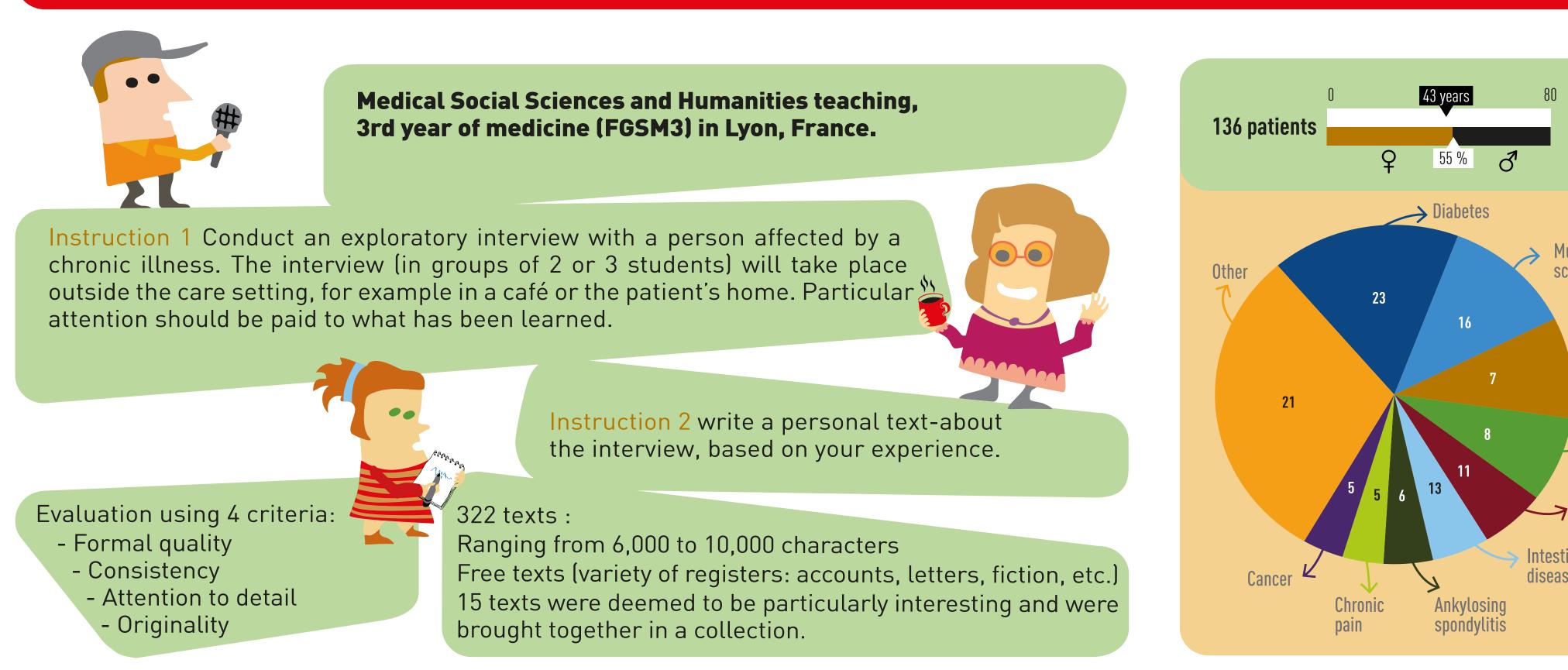
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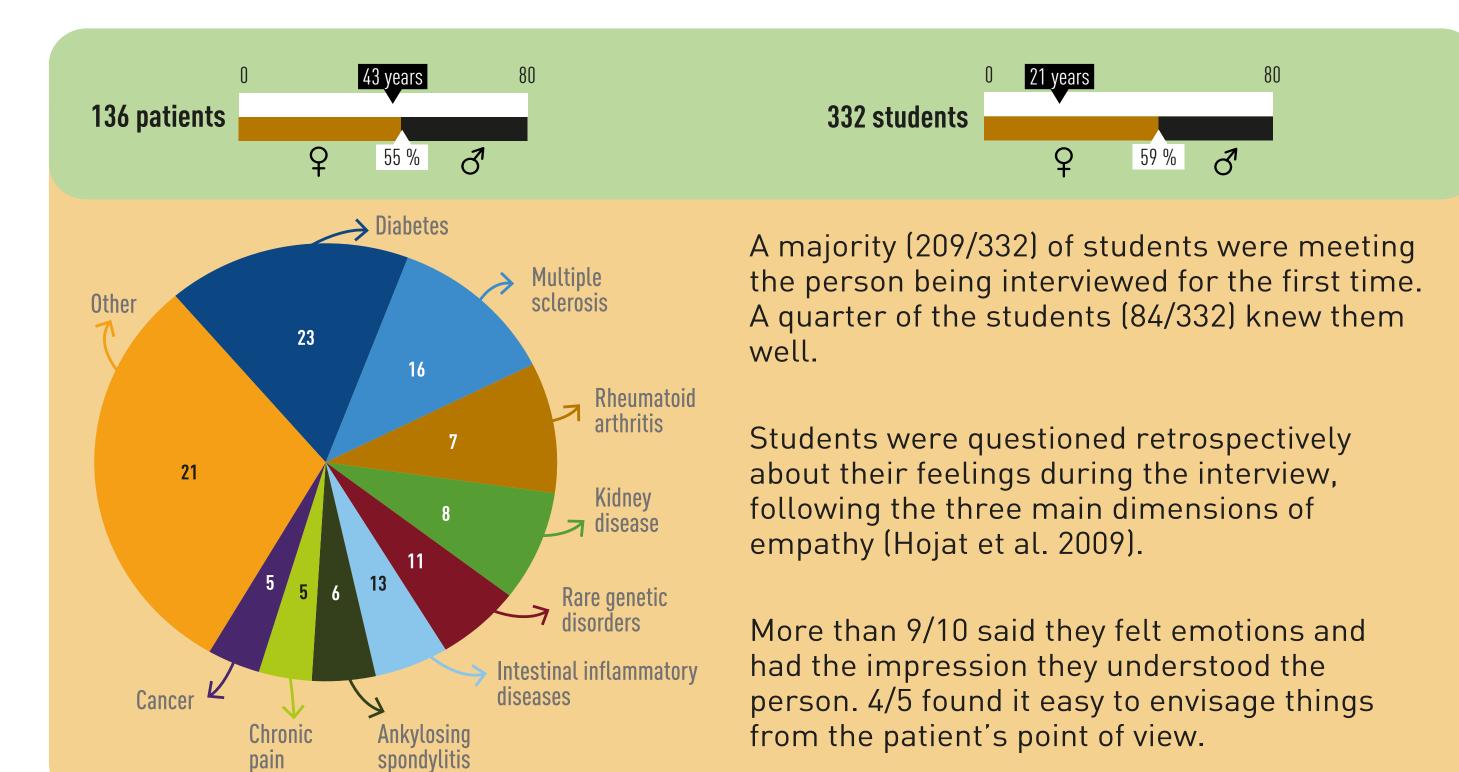
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Patient interviews Analysis of 332 free texts from medical students drafted after an exploratory meeting with someone with

Does being exposed to the experiential knowledge of patients help students develop their reflexivity and empathic skills?





Aims of the analysis

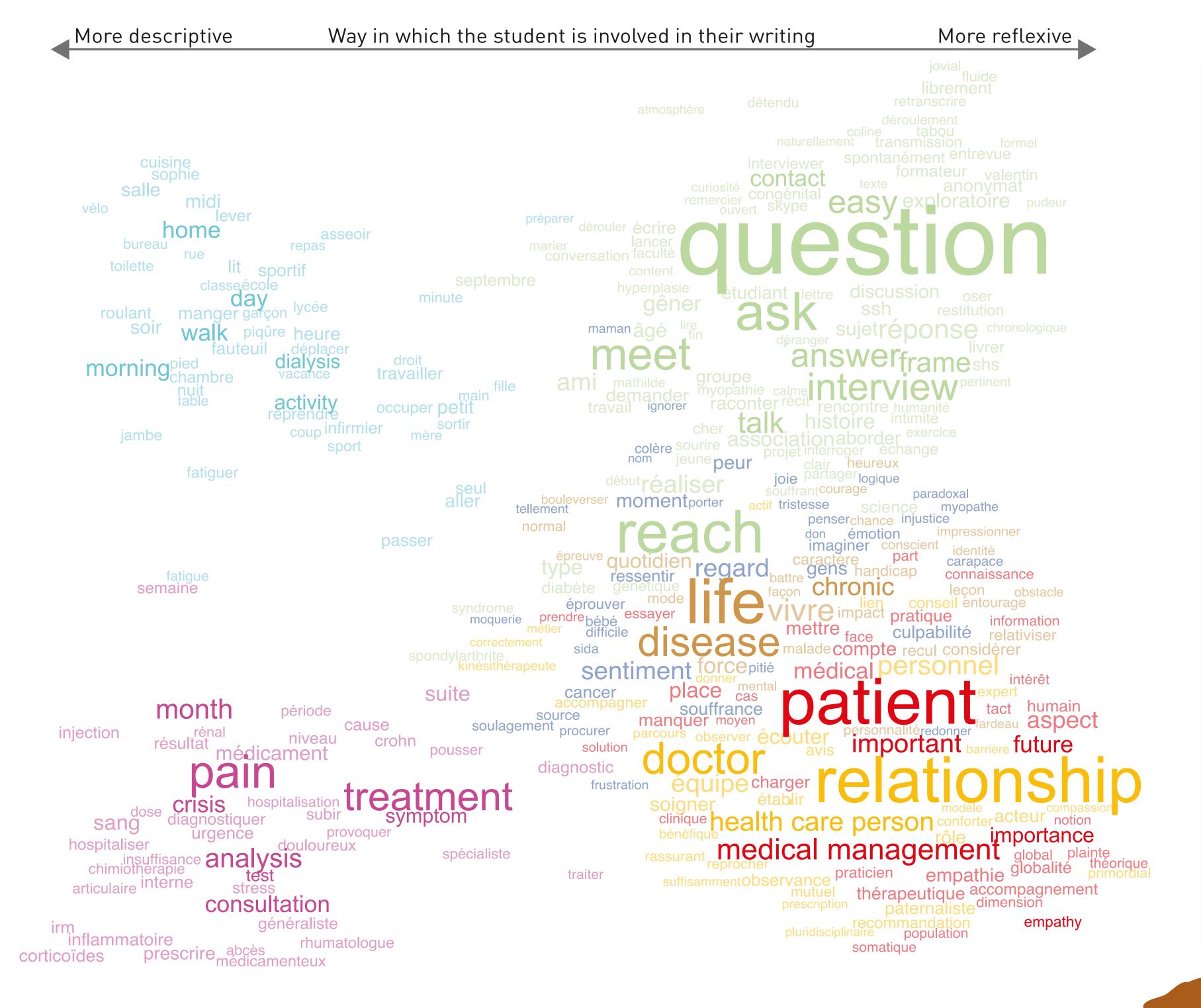
- To gain an overview of the
- global content of the texts - To identify the forms of ethical and practical commitments formulated by the students

Factorial correspondence analysis

A lexicometric study of the entire corpus (387,000 words) was conducted using IRaMuteQ open source software (Ratinaud and Marchand 2015).

Each colour corresponds to a class, built using hierarchical cluster analysis (divisive type) (Alceste/Reinert method).

The larger the word, the more it is associated with the cluster which it contributes towards building.



Ethical and practical commitments

The students envisage a holistic, patient-centred approach. In these excerpts, the words in red are those which are most often connected with the 'commitments' cluster:

«As a <mark>future</mark> healthcare professional, it is **important** to understand that the patient is, above all, a human being; and **treatment** must be built upon an alliance between **doctor** and **patient**.

« (...) I **realised** that it is **important** to be able to hand over when you don't know, so that the patient can get the **best care** possible. It is also very important to take into account the patient's pain and anxiety in my

«It is **important** to **try** to **put** yourself in the patient's position to become real allies in the **doctor-patient relationship**. I am now **counting** heavily upon internships and direct contact with patients to continue to develop both **knowledge** and **interpersonal** skills.

« (...) hence the **importance** for us as doctors to fully explain to the patient from the very start what is involved in establishing **good care**, even if the patient doesn't feel like the symptoms are **important**. >>

«As future doctors, we have our own perspective of the disease, but it is **important** not to **forget** to take into account **social issues** and how stigmatisation may impact

« (...) this **helped** us to **put ourselves** in the person's **place** so that, in the **future**, we ask patients the right questions and define together the **best treatment** they would be able to cope with. >>

(...)listening, support, and respect for **patients'** rights. I hope as a Doctor that you **understand** the **importance** of my request and will **implement** the resources needed to treat our patient as best as possible.



What do the

texts?

students talk

about in these

Patients' daily activities

Patients' biomedical

Context of the interview

of the correspondence analysis,

and how it took place

trajectories

In this representation

there are four clusters

to one another:

which are closely related

Emotions and affects

Psychosocial impact

of the chronic illness

Ethical and practical

commitments

Relationship between patients

and healthcare providers

«I took note of the **patient's** comments and will always **strive** to **put** myself in the **patient's shoes** in my **future** medical practice.>>>

Results

- Meeting patients and sharing their experiences encourages students to formulate ethical and practical commitments.
- In their texts, the students explored psychosocial, emotional and relational realms, on the basis of their own experience. They reflected upon the direction their future practices should take.
- Students often mentioned a kind of epiphany, a conversion to the patient's point of view.

Discussion

- Exploration of the student's texts shows that personal interviews with patients elicit reflexivity and encourage empathy, as previously reported (Kelm et al. 2014). Meeting a patient and writing an account therefore facilitates learning and bolsters professional development.
- The content of the texts may have been different had the interviews been carried out in the hospital. There are a number of reasons for this, including the fact that differences in status are more pronounced in the hospital and that students have to stick more clearly to their role as medical trainees. Our study confirms the educational value of carrying out such interviews in the home, as previously stressed by Mullen et al. (2010) and Yuen et al. (2006)
- It is hoped that commitments which were recurrently found in the students' texts will help them face and overcome the risk of 'empathy decline', which has been observed during medical training (Neumann 2011).

PATIENT INTERVIEWS WRITING **EXPERIENCE WHICH** IS BOTH FUN AND EDUCATIONAL FOR STUDENTS, ENABLING THEM TO **IMAGINE THEMSELVES IN THEIR FUTURE PRACTICE AND TO DEVELOP** PERSONAL ETHICAL. **AND PRACTICAL COMMITMENTS**





