

■ Personal Statement Writing as a Developmental Process: Reflections from One Advisor

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For an applicant, writing a personal statement is never just about composing an essay. For an advisor, reviewing a personal statement is never just about critiquing a piece of writing. In this article I reflect on the role the personal statement plays in our relationships with our advisees and in their personal development.

While the personal statement is a central component of an application, and a product that applicants must produce as part of the admissions process, it is much more. I propose that much is to be gained by viewing personal statement writing as a developmental process that is integral to the individual development of future healthcare providers. Drawing on my experiences leading personal statement writing workshops and working one-on-one with students, I propose that in the process of writing a personal statement, applicants change their personal narratives about their lives and undergo a significant change in identity that has consequences for their transition into their future careers in healthcare. Working with students while they craft their personal statements is often the time when I feel like I get to know my students the best and I've come to feel it's the time when I do my most important work with them.

First, I want to offer a disclaimer. This is not an article primarily focused on

what makes the “best” personal statement. I want to focus instead on the role the personal statement plays in our relationship with our advisees and in their personal development. The techniques I'll discuss can however help students produce a stronger personal statement.

Narrative Theory and Student Development

Narrative theory offers useful insights for thinking about personal statement writing. Narrative theory draws attention to storytelling as an important human activity through which we make sense of our experiences. Our stories have an important function in ascribing meaning to experience (White and Epston 1990). The stories we tell ourselves and others about ourselves shape who we are. Each of us, including health professions advisors, has a personal narrative that is embedded in family narratives and collective narratives produced by our society and culture and subcultures. Stories guide actions and shape goals we want to achieve in our lives.

Narrative theory has been influential in many fields from cultural studies to behavioral and social sciences and even medicine (Charon 2006). I believe it's also relevant to what we do as pre-health advisors. In social work and psychology, the practice

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of narrative therapy focuses on understanding the client's story and uncovering how changing the story could help lead to life change (White and Epston 1990). Narrative medicine seeks to place patients' stories of illness at the center of medical practice in a way that can help restore to patients a sense of empowerment (Charon 2006).

One of the central ideas that comes out of narrative theory is that our identities are shaped by the accounts of our lives in the stories we tell others and tell ourselves. We all develop a "dominant story" about our lives. While we revise our narratives throughout our lives, for many people college is a critical phase of identity development. The college years are a time of significant reworking of one's personal identity, and other observers have noted that the construction of personal life stories is bound to the changing identities of college students (Chickering and Reisser 1993; Baxter Magolda 2001; Jones and Abes 2013). College could be characterized as a time of transition when persons construct the narrative of their adult selves (Baxter Magolda 2001; Hammack and Toolis 2014).¹

Following is the central thesis I'd like to propose. In the process of writing a personal statement, applicants change their personal narratives about their lives. This process of changing their narrative is linked to changing their identity (this is why writing a personal statement can be so hard for some students, too). Drawing on Marcia Baxter Magolda, one might say personal statement writing often puts students at a difficult crossroads between external and internal meaning-making (Baxter Magolda 2001). Applicants undergo a process in which they simultaneously change their narrative, change their identity, and change their understanding of themselves.² How they go about this process shapes the kind of guiding narrative that will support their transition into their future careers in healthcare.

I base this thesis on my professional experience advising pre-health students. While writing their personal statements, applicants are often reflecting in new ways on their own personal development from childhood into adulthood. This process seems to accompany a greater awareness of the student's place in the adult world. When working with a student from first draft to final version I often have found that the student seems to have undergone a significant change, and has become in some ways a different person than when s/he first started writing. In the best of circumstances, students become more capable of reflecting on themselves and emerge clearer and more certain about themselves and their goals.³ I believe that writing is a practice that facilitates that change.

Why does this matter? Through writing their personal statements our students construct the narrative that will guide them as they make the transition into their future careers as healthcare providers. Stories guide actions and shape goals we want to achieve in our lives. Rita Charon (2006) argues persuasively that developing narrative skills is critical to the process of becoming a truly effective caregiver.⁴ Charon emphasizes how the ability to reflect on experience can help healthcare providers sustain the emotional capacity to provide compassionate care for the ill and dying on a day-to-day basis.⁵ When we work with students while they craft their personal statements, health professions advisors serve as interlocutors in dialogue with students as they are constructing the central guiding narrative for their future careers. By supporting them as they shape this narrative we can help them become more self-reflective. As Hammack and Toolis observe, "listeners help to impart meaning to stories" (Hammack and Toolis 2014, 51). I would even suggest that advisors are uniquely positioned to help direct the attention of future healthcare providers toward an emphasis on patients and thereby shape their guiding narratives, making them more patient-centered.

Pressure to Market the Self

Students often come in to my office and tell me they've already read some advice online about writing personal statements. I wanted to see what our students are reading, so I Googled "medical school personal statement." Following is some of the advice I found.

From the website Accepted.com:

Your goal is to create a medical school essay that puts you ahead of the applicant pack. To accomplish this you'll need to compose a compelling personal statement that portrays you at your best—compassionate, intelligent, and highly motivated.

The sample personal statements below will get your creative juices flowing and provide varied examples of winning essays. Pay attention to how each one begins with an engaging opening, follows through with an effective theme, and then wraps up with a conclusive ending. Your essays, like these samples, should give the adcom readers a sense of you as an individual, a student, and a future medical professional; they should get the reader to say, "Hey, this is a person I'd like to meet."

From The Student Doctor Network:

"Because your essay may only get a few minutes of face time, it needs to function as both an essay and an advertisement. The best essays grab the reader's attention on the first read, and hold it even if it's the last essay of the day for the reader." (Farmer 2007)

Not surprisingly, a lot of the online advice emphasizes the need to set oneself apart, distinguish oneself, and market oneself. Granted, we all know how important it is for applicants to distinguish themselves in order to gain admission, but for those just starting out to write such advice often causes them to feel extreme pressure to differentiate themselves. That leads many students toward artificiality and superficiality in their writing as they try so hard to be distinctive that they focus on this to the exclusion of other elements that make a personal essay effective.

After receiving that kind of advice, students often come in and say:

"I'm having trouble coming up with a theme"

"I can't think of how to start my statement"

"I need a good opening and without that I can't start writing"

For these students, it may not be helpful to repeat to them, "You've *got* to write an essay that will stand out!" The advice that I have found most helpful is, "Let the theme grow out of the process of writing itself." This phrase increases their confidence in themselves and in developing their own voice.

There is no doubt that students do need to put things together in an appealing way in their applications, but unfortunately the pressure to market themselves overshadows many of the other things our students do, even long before they apply. I have often heard students use such phrases as, "I think my application will be strong: I have research, I have leadership, I have volunteering." This way of speaking seems to reflect the idea that the applicant is a product with certain attributes to be marketed. This "language of having" is very different from the "language of experiencing" used by other students who begin by telling me about a particular experience they've had and just why it was so meaningful and life-changing for them. The marketing mentality can detract from what some of our students get out of experiences that genuinely should contribute to their personal development. Concerns

about how experiences will "look" on an application unfortunately too often overshadow what our students actually experience.⁶

Finding A Way Forward

Health professions advisors are in a unique position to help cut through this dense thicket of thorny issues. Through writing workshops and our individual work with students, we can provide an alternate space for students to reflect on their experiences, themselves, and their future careers. Here I want to suggest some ways that advising offices can operate to not only help students with the application process, but support their personal development.

First, we can provide concrete advice on methods for developing a personal statement in a way that contrasts with the "marketing" approach students find elsewhere. Students often feel a lot of external pressure while constructing that narrative, and not only from the internet-- also from parents, siblings, and peers. This makes it harder for them to develop their own voice and construct their own narrative.⁷ We can continually emphasize to students that they should write of their own personal lived experience (White and Epston 1990).

One way we can help students is by simply encouraging them to write. On our campus, from the very first orientation meetings students are encouraged to keep a pre-health journal for reflecting on their experiences. A lot of our students are science majors and some do not like to write, so it's important to emphasize to them that writing is a tool for thinking about things in new ways, and that the process of writing is linked to learning new ways of thinking. Writing itself is an important activity for building the ability to reflect on experiences. I point out to students that when you sit down to write, you often start out with one thought, which leads to another thought, which leads to another, and at the end you may find you have thought about something you have never thought about before. The type of reflection one does in writing is distinctive also because writing presupposes a reader, positioning oneself in relationship with another.⁸

Advisors can help to reframe the process of writing application essays and offer continual reminders to students not to view themselves like a package or product to be marketed. We can provide guidance through a variety of means to encourage deeper reflection. In response to students who are finding it especially difficult to deal with the pressure to market themselves, some phrases that I've found helpful include:

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You don't need to build your personal statement around one earthshaking experience or have a catchy theme for your personal statement to stand out. Some of the best statements I have read focus on ordinary events that many other people may have experienced. What makes the essay stand out are the writer's unique insights and ability to reflect on these experiences.

Offering personal statement writing workshops provides us rich opportunities to do much more than just help students craft a winning essay. Workshops can allow us to address upfront common themes in the narratives produced by applicants to health profession schools. When I first started offering writing workshops I did it partly because I was tired of reading statements that I thought were not very good and just headed in the wrong direction from the start. I wanted to increase my own efficiency by getting students off to a good start by telling them what makes for a good statement and what makes a bad statement. I found over time, though, that personal statement workshops gave me an opportunity to address many issues beyond essay writing with pre-health students. I developed a PowerPoint presentation that includes slides with samples of writing from personal statements, which we read and then discuss in a group. I use examples from the excellent NAAHP publication, *Write for Success: Preparing a Successful Essay for Your Application to Health Professions School* (Jackson, Bardo and Cummings 2014). I also include slides on other common themes explored in personal statements.

During these workshops I have found that I can sometimes talk about issues that are more difficult to talk about during one-on-one meetings. For example, we discuss one excerpt in which an applicant seems to espouse a hierarchical view of the relationship of physicians to other healthcare workers. Discussing this passage allows us to open up a broader discussion of mutual respect, teamwork, and interprofessional healthcare. In another instance, we discuss why an admissions committee might conclude that an applicant has felt pressured by parents to become a physician based on what the applicant writes, allowing for a discussion of this circumstance pre-health students sometimes face.

I've read many essays that open with the applicant describing putting bandages on teddy bears and dolls as a child, as though this provided evidence that the applicant was destined to be a doctor. Discussing this theme in workshops gives me the opportunity to point out that this kind of opening can create a lingering childlike image of the applicant for the reader that overshadows the rest of the essay. Such discussions do not just provide guidance on essay writing, but help everyone in the room to pause

and reflect on the fact that they are now adults pursuing an adult profession.

Concerning another common essay theme, a number of applicants will claim "I was *born* to be a doctor." Writing workshops offer an opportunity to discuss this idea, which some applicants privately hold. I point out that while this belief is very common, such declarations are unconvincing to admissions committees. I go on to discuss that there are many potential careers for any given person, and that the choice of a career is not anyone's fate: it must be a conscious, informed choice. We discuss why it would be better to write about what has led you to make an informed choice to become a physician, rather than asserting that you were fated to become one, and this prompts everyone in the room to think more deeply about their own choices.

Health professions advisors can also help students by providing opportunities for guided reflection (Wald 2015). Wanting to provide a more focused way of helping students brainstorm, I started doing an exercise in my workshops to help them get started generating ideas. For the exercise, I pass out blank sheets of paper and talk them through a series of prompts:

With paper and pen in front of you, jot down quick notes as you think about the experiences in your life that have led up to the point where you are sitting in this workshop. How did you get here?

Think about the events in your life that got you started on the path toward medicine.

Is there one experience that stands out? Actually there may not be just one, and that's okay.

Think about what has attracted you to the idea of becoming a healthcare provider.

Quickly just jot down any words at all that occur to you.

Don't worry about writing complete sentences, just freely jot down words and phrases that come to mind.

What started you on the path to medicine, and what kept you going on that path once you had already started?

What words would you use to describe how you felt during these experiences?

What do you want to achieve through medicine?

What do you value? What's important to you?

Has your vision of healthcare changed as you changed?

When I first began to do this exercise, I wasn't sure how students would respond, but I've been truly amazed at how readily students participate and how enthusiastically they respond to it. We take several minutes to do the exercise. Some students start out gradually writing down a few words, and then begin writing more. Some students write so furiously that I almost regret having to bring the exercise to a close and move on with the rest of the workshop. After completing the exercise, I encourage students to keep their paper out during the rest of the workshop and many continue to write notes. Many students later bring these sheets into appointments to discuss their ideas.

Giving students one-on-one feedback on their personal statements opens up other opportunities for us to support student development. Encouraging students to bring drafts of their personal statements to appointments makes it possible to build new kinds of connections with our students. The act of reading what another has written necessarily binds the writer and the reader in a relationship (Charon 2006). It is also important that while giving feedback we continually reinforce that the personal statement should represent the student's own point of view, not ours. I find that phrasing my comments in the form of questions that the essay raised for me as a reader is often an effective way to encourage students to delve deeper into their own narratives.

Reviewing a personal statement provides us an opportunity to give feedback in a way that other situations in advising may not. Uncovering inconsistencies in an essay is sometimes a way of addressing questions about the clarity of motivations. In ordinary advising appointments we don't stop to point out the implications of everything a student says to us. When reviewing a personal statement we can say, "I realize you may not have meant to convey this impression, but an admissions committee could get this idea about you from what you have written."

When providing feedback on a personal statement we have permission to respond in ways we might not otherwise. During an ordinary advising meeting we may let a thoughtless remark slide, but when we've been asked for feedback on an essay our job is to give our honest opinions. We've all probably encountered the applicant with a high MCAT and high GPA who is acutely aware of his or her intellectual talents but seemingly unaware of how an insensitive comment might be perceived by others.

In reviewing a personal statement we can say, "This could sound arrogant to an admissions committee," or "This might seem to reflect a hierarchical view of healthcare," or "This might imply you would be judgmental toward your patients or blame them for their illnesses." Providing this feedback is important: many students will readily admit they've been so caught up in trying to become a competitive applicant they have not thought about how what they say might be perceived by others. We are in a unique position to read this career narrative as a patient might (for we are all patients) and speak to it.

Students reveal some of their most private thoughts and feelings in their personal statements, and we must honor the honesty of their stories even when they are not well-written. Sometimes students bring us statements that speak of grief and loss that they have experienced, conditions sometimes linked to the motivation for becoming a healthcare provider. I have learned to make sure I remember to pause to remove my editorial hat and put down my red pen at these times, and say, "I'm so sorry for your loss," "That must have been very painful," or "I'm so sorry for you"--even when the writing needs a lot of work. Only then we can move forward to talk about the essay.

Sometimes the essay itself becomes secondary to the reflective work that is done by both advisor and advisee in the context of advising. Our questions can help develop the narratives of our students' lives. As listeners and readers we help to draw meaning out of these stories. Advisors are not therapists, yet we cannot deny the therapeutic effects of advising, as well as writing. Charon links narrative competence to a more patient-centered model of care (Charon 2006, 27). Hedy Wald (2015) points out that there is emerging evidence that reflective writing boosts resiliency throughout the professional lives of healthcare providers (Wald 2015, 704). By helping students develop these skills we can help them not just get admitted but prepare for the road ahead.

Alternative Narratives

Health professions advisors also have guiding narratives about our careers. The hope that our students will become caring, compassionate, and skilled healthcare providers inspires us to work harder and gives meaning to our work every day. We are all dependent on medicine. Every human being is a patient. We find value in our work because our jobs give us a means to serve humanity through our students.

Through the process of reflecting on these issues, I also began to think about how the different components of

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the application fit into the admissions process. There are times when our role as advisors is most prominently defined by our role in evaluating students and producing recommendation letters. I have pondered why so much effort is devoted to those documents that represent *our* narratives. If medical schools show preference for committee letters (whether as policy or in practice), what pressures does this create for advisors to invest more of our efforts in producing narratives that reflect our voices, rather than investing our time in helping students develop their own voices? What might be the effects for medicine?

Our time is limited and each of us must weigh the relative value of competing tasks to which we could devote our efforts. Advisors often lack the resources to simultaneously oversee a pre-health committee letter process while also providing the kinds of support that I discuss in this article that may be more important to our students' development. Confidential evaluations that are hidden from the student are not effective instruments of growth: listening, reading, and honest feedback can be. Our work in providing feedback through the writing process puts us in a unique position to help students develop essential skills that will support their transition into becoming patient-centered physicians. We can have a more lasting impact on our students--and the future of healthcare--not just by helping them get admitted but by shaping who they become.

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Endnotes

1. As Phillip Hammack and Erin Toolis put it, "Emerging adulthood represents a time in which individuals in many nations negotiate not only the meaning of their identities in relation to their personal past and present, but also make meaning of the very idea of adulthood" (Hammack and Toolis 2014, 51).
2. As White and Epston propose, "Since the stories that persons have about their lives determine both the ascription of meaning to experience and the selection of those aspects of experience that are to be given expression, these stories are constitutive or shaping of persons' lives. The lives and relationships of persons evolve as they live through or perform these stories" (White and Epston 1990, 40).
3. One might say these students achieve what Baxter Magolda identifies as "the capacity for self-authorship

– the capacity to internally define their own beliefs, identity, and relationships. This self-authorship, this internal capacity, is the necessary foundation for mutual, collaborative participation with others in adult life" (Baxter Magolda 2001, xvi). This capacity is particularly critical for healthcare providers to work in a mutually collaborative manner with patients.

4. Hedy Wald (2015) also writes about the ways that developing skills in self-reflection plays an indispensable role in the education of future physicians.
5. Charon provides numerous other examples of how narrative functions within medicine. She emphasizes how important it is that a healthcare provider be able to fully hear a patient's story in order to be moved to act on the patient's behalf. As an additional example of how narrative processes pervade medical practice, Charon notes that even diagnosis imposes a plot connecting the patient's emerging symptoms with the development of illness (Charon 2006, 48-51).
6. As a student interviewed in one study said, [you have to] "(T)hink about what looks good on paper, I know that sounds really bad, but, you have to do things that you like but also do things that med school likes that you may or may not be totally gung-ho to do...I just can't do bench top experiments...so I forced myself to do a little bit of that and I can't say I enjoyed the experience very much" (Lin et al., 2014, 101).
7. Pre-health advisors sometimes exchange stories about instances when they've found that a parent was re-writing the student's essay; in other words, literally trying to exercise control over the student's personal narrative.
8. I'm grateful to David Brawn for making this point to me.

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