Creating Healthy Relationships Even When It's Difficult

Medical school is a highly relational time whether you are in the classroom or in the clinic. It is important to build skills that can help you communicate and know how to get support. Read along to find out what your classmates advised when encountering difficult situations.

Q: How do you advocate for yourself when you have challenging team dynamics?

M4: You can tell your clerkship coordinators a lot in confidence and they can give you ideas about what you can do to approach the situation. You don't have to and are not expected to deal with everything alone! Lean on your coordinators to speak up when you cannot, especially when approaching residents or attendings.

M3: Depending on the case, I talk it through with my Core Advisor who is very supportive and always provided non-judgmental responses to concerns that I would normally hesitate on.

M2: I would talk to someone I respect/trust who is also on the team. I’d vocalize my concerns and strategize ways to effectively handle the situation. This helps me feel more confident that I am advocating for myself appropriately!

HOT TIP: If confrontation puts you on edge, start by practicing with people you trust.
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Q: How do you share leadership in a team?

M4: I think this is the most difficult part of being a student in the hospital and in the classroom. As an M3, you are basically always sharing patients with your intern, and by the end of the year, you might not see the purpose in this. When taking care of patients, let your residents know what you can do and where you need more support. Clear boundaries make co-leading much easier.

M4: In a student group I co-led, I felt like it was a passion project only I could lead. We had to sit down, come up with a concrete game plan of who would be doing what that made both of us comfortable. It is good to establish clear expectations of how you would like to support each other as co-leaders.

M2: This one is difficult! It’s hard to balance allowing everyone to have a voice vs. having an objective in my mind and pushing ahead myself. Establish solid expectations about the leadership so it can get done in a timely manner with clearly communicated goals.
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Q : How do you take the lead?

M4 : Acknowledge where you're at with what you can and cannot yet do. I recently had a Sub-I and the entire rotation was daunting. Through 3rd year, I worked a lot on writing notes so I'd prep discharge summaries, hospital summaries, progress notes for the next day, etc. The team noticed that preparedness and that was the way I was able to lead with my patients. Do what you can and do it well, you can learn the rest as you go.

M3 : Lead by example and hold myself accountable.

HOT TIP

When in a difficult conversation, take the lead with these 4 steps:
1. Take a breath
2. Concede you do not know the other person’s intentions (“Hey, you may or may not be aware but I’ve been...”)
3. Describe your emotions (“That comment you made stung”)
4. Trade perspectives (“What do you think I am missing?”)
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Q & A

How do you navigate inappropriate or offensive comments?

M4: I will either tell the person I am uncomfortable with or report them to the Appropriate Treatment in Medicine (ATM) Committee. ATM is good because eventually that person/department will get all your feedback and hopefully improve and it is anonymous.

M4: Talk to your Student Affairs Dean, friends, family and peers who are all great assets. They can give you insight on what they would do or how they may think about the events you’re going through. If you feel like you are too tired or don’t have the capacity, lean on others.

M3: I try to put emotions aside so that I can address the comment professionally, but will call it out asap.

HOT TIP

Learn more about the Appropriate Treatment in Medicine (click here) and Office of the Ombuds (click here).
Q & A

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How do you recognize and respond to constructive feedback?

M4: It typically comes with specific recommendations on how to achieve better results or ways to help yourself grow. For e.g., someone told me I should work on my differentials and to incorporate them into presentations. Another person gave me actual resources to help me build my differentials and help me think about cases in a different way (listen to Curbsiders when you have the chance!) and that was very helpful.

M4: If someone is giving vague feedback, follow up by asking what they did or how you may be able to improve in that area.

M2: I approach situations with the attitude that I have a lot to learn and that I will make mistakes. This allows me to take in constructive feedback and use it to positively adapt strategies moving forward, instead of feeling like the feedback is intended to put me down!

HOT TIP

Need to hash out some questions about feedback you received? Talk to your SAO Dean or AME Core Advisor as a reliable sounding board.
Q & A

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Q: How do you process difficult feedback?

M4: Sometimes feedback can be very hurtful in the moment. It can take awhile to process and really come to terms with where you need to improve. Taking as much time as you need has been helpful for me. Sometimes you cannot improve within the week, month or even year you were given the feedback in. Acknowledge your shortcomings, rely on your teammates for further feedback as you work on them, and give yourself grace to not do everything perfectly the 1st, 5th or even 20th time.

M2: I think it can be super challenging to do, especially in the moment. Because of this, I try to take some time to fully flush out how I am feeling about the feedback, thinking about the validity, the intention, and how to move forward.

M2: I try to understand where others are coming from, assess whether their feedback is attainable and have a conversation. "I understand you are suggesting X, however I feel uncomfortable, unprepared. What do you think about us..." or "I understand you are suggesting X and I can make changes right away."
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Q: How do you work with someone you do not like?

M4: It's never an enjoyable experience for sure. Try to take it as an opportunity. All interactions can give some lessons; glean on what exactly you don't like in that person and how you can avoid such types going forward or you could lean into what good qualities they may have and bear with it for the week-month you’re working together. Keep in mind that these people, even if they're grading you or even if they're a co-student that's just a tad overzealous, have no actual bearing on your future.

M2: I think that being civil is always an appropriate measure, it is hard to get along with everyone, especially in large teams where everyone has differing personal objectives. Making sure that whatever the main objective of the job is being done (and communicating effectively with team members in order to do so), is honestly the best strategy I have found.

M3: Keep the relationship professional. You aren’t going to be best friends with everyone you work with but recognize that you can overcome differences to work with them for the benefit of your team.
Medical School Wellbeing Resources

Medical Student Wellbeing
One-stop hub for all wellness events and resources for medical students.

Headspace
Research-backed app for mindfulness and meditation.

Behavioral Medicine
Wide range of mental health services to students including assessment and diagnosis, brief treatment, 24/7 on-call line, referrals and more.

Student Affairs Office (SAO) Deans
Drop by office hours to speak to a SAO Dean or schedule an appointment.