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Using vlogging to facilitate medical student reflection

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ABSTRACT

Reflection is a critical skill for medical professionals, however medical students often find it difficult to grasp and engage with. During a special choice module on yoga and mindfulness, students practised mindfulness at home and posted their reflections on the activities in text and vlogs in a closed WhatsApp group. Semi-structured focus groups investigated student perspectives on the acceptability and impact of v-logging on their reflective practice. We thematically analysed transcripts of the WhatsApp conversations and two focus groups. Students felt v-logging was more engaging and convenient than written reflections. V-logging was found to enhance emotional content that is commonly lacking in written reflection, which is has importance as emotional recognition promotes a higher quality of reflection. Although some students were concerned about their appearance in videos, they appeared to overcome this, finding v-logging facilitated deeper reflection compared with traditional written reflections due to accessibility and ease of expression. Furthermore, there was additional learning through watching other students' emotive vlogs which fits with the phenomenon of reflective vicarious learning. Sharing vlogs within a WhatsApp group appeared to be an accessible way for facilitating greater engagement with affective and expressive aspects of reflection.

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Reflection; emotion; social media; vlog; WhatsApp; diary

Background

Early undergraduate reflective learning enhances critical thinking and professionalism [1]. However, medical students sometimes perceive reflection negatively as a 'soft skill' and may not engage with it well [2]. Through attempts to include opportunities for reflection in the curriculum, reflection fatigue can also develop [2]. Some programmes have used social media [3–5] to address these challenges. Social media has features that encourage both engagement and reflection, particularly with self-awareness, professional identity formation [6], and a sense of ownership when content is self-created.

Vlogs are video commentaries that can be shared on social media. Vlogs differ from videos traditionally used in communication training, which are usually watched back with a tutor during a timetabled session. Vlogs are often recorded as a reaction to share on social media soon after an event. They could therefore be a useful tool for increasing participatory learning outside the classroom. Medical students have themselves recommended using vlogs [7] although v-logging specifically to capture reflections has not previously been explored in medical education.

WhatsApp is a social messaging platform that allows group chats and multimedia sharing. WhatsApp groups have been used to reflect on compassionate acts witnessed by medical students [8], but their acceptability was not evaluated. No previous work has explored the combination of v-logging and group sharing, as a means of developing reflective skills.

Therefore, our aims were firstly, to investigate how acceptable v-logging in a WhatsApp group was to capture reflections and secondly to explore students' perceptions of the impact of these methods on reflection.

What we did

The study took place at Imperial College with year 3 students on a 10-week general practice placement. Every student takes one special choice module (SCM) involving one taught session a week on campus, for four weeks. General practice placements offer opportunities to engage with bio-psycho-social aspects of medical care and so such modules are well suited to such a placement. The students involved in our study were self-selected and chose the SCM in yoga and mindfulness. They were encouraged to undertake mindfulness practice at home

and upload their ongoing reflections as texts and vlogs in a WhatsApp group exclusively by the course lead and students participating in the module. The course lead gave structured prompts and moderated the reflections posted to the group. This format was repeated termly for 3 cohorts. In total 23 students took part in the SCM over the year.

Two semi-structured focus groups were held immediately after the final taught session. Eleven students volunteered and each focus group lasted 45 minutes, conducted by a researcher who was not involved in teaching or assessing the students. The focus groups were transcribed, thematically analysed, and the themes generated were agreed by the authors.

What worked and how

Benefits

Engagement

Students found v-logging more engaging than written reflections. They commented that *'it was much more interesting than doing a report'* and *'I'm not a fan of writing reflections. They end up formal when typing'* suggesting that the informality of vlogs helped them engage with reflection.

Increased awareness of emotions

The General Medical Council's guide to reflection emphasises the need to consider emotions to be a good reflective practitioner [9]. Students reported that they displayed more emotion *'less self-editing and more [focus] on feelings'* when reflecting through vlogs over writing. Hargreaves quotes from Brown's research [10] where medical students disclosed more emotion when they verbalised their reflections with a tutor or another student. V-logging may be reproducing this sense of two-way communication, albeit asynchronously, as a key aspect of vlogs is that they are shared with others. Vlogs are recorded in real-time as thoughts and emotions are felt, students reported *'being in the moment'* and *'remember[ing] everything better'* when videoing.

Accessibility of using smartphones

The convenience of using smartphones was viewed positively. As one participant commented *'you're always on your phone, it's easy to do if you're on the bus'*.

Similarly, another participant felt v-logging made reflection quicker due to the immediacy compared to writing a reflective piece, *'when writing, you forget how you felt'*.

Social learning

Vicarious learning appeared to impact students' engagement with reflection as *'it was easier as [I had] seen others do it'*. Another said, *'I liked that you could see what everyone was doing and where everyone was at, and it was personal rather than writing because you can see their faces and hear what they're saying'*.

Additionally, there was accountability to each other in sharing the vlogs on the WhatsApp group. Students felt incentivised to reflect and share their vlogs because other students were doing the same.

Tensions

Psychological safety

An important tension was self-consciousness, both when creating and when sharing on WhatsApp. Some students felt awkward filming where their housemates could hear them. Although it was not mandated, the task lent itself to v-logging near the time of mindfulness practice, which was often when they were in less formal settings at home. Some *'did not enjoy it to begin with'* but came to see the value with practice and time. Some recognised this as a journey in their experiential learning. *'I don't know how I feel about the v-log. I think I'm going to get too emotional crying all the time. But imagine in one month's time we become super into it'*.

Students suggested audio recordings could be less embarrassing, however for some students this initial discomfort did not persist through the module.

"But then, as time went on, I actually didn't mind it as much, and as much as the times where I thought to myself this is annoying, I'm going to have to ... find a quiet space and record this and think about what I'm going to say, it made me reflect on what I was doing. And if I was writing or if I wasn't doing it every day, I don't think I would've got as much benefit."

As with any reflective work, there is risk of highlighting students' vulnerabilities. One student said, *'it brought out insecurities I have about my voice and face and how people perceive me'*. However, the same student reflected that, *'at the end I felt a bit better about it because it was really interesting to watch them [videos] and see their progression'*. Tutors took care to ensure safety by setting ground rules, being available, and by following-up on concerns by signposting relevant services.

There was some concern amongst students that using WhatsApp was ‘*unprofessional*,’ although the context suggested the concern was about the messages encroaching on their personal time boundaries, this was again addressed in the ground rules.

Technology issues – storage and quality

Storage limits and recording quality sometimes negatively impacted students’ experience, the course lead suggested methods to circumvent this, such as using a different device.

Burden

The students were asked to practise mindfulness daily *and* regularly reflect and v-log about it. One student called it ‘*tedious*’. Perhaps too many new ideas and tasks were introduced in tandem. This could be seen as excessive burden for an optional module within a busy, high-stakes medical curriculum. It cannot be assumed that all students would be familiar with the technology or how to produce a reflective narrative. It was a new way of learning and may have needed better management of expectations.

Discussion

Our findings show how v-logging on a group messenger can support medical student reflection. Medical students prefer reflecting in media-rich environments and using digital storytelling [11], matching a key finding of our study – greater student engagement with reflection when v-logging. For most students it was an accessible, acceptable medium that incorporates elements of social learning. As might be expected with visual recording, a key theme was embarrassment, but interestingly this was overcome in time. This is similar to when students first role-play or are videoed and is therefore not unique to v-logging. V-logging engendered deeper reflection, as it allowed students to capture their own emotions more naturally, and to vicariously learn from seeing peers’ reflections and emotions when they watched each other’s work. Boud [12] emphasised emotional recognition as key to reflection and suggested that reflection could be blocked if emotions are not considered. Additionally, Wald’s paper on developing reflective skills in medical students [1] suggests attendance to emotions demonstrates higher-level reflection.

The near-time peer and tutor support through the WhatsApp group may be confounders in what exactly engendered the reflection. Previous work has shown daily reflections increase medical student awareness of thoughts and action (Larsen, 2016). We did not have

a control group to act as a comparison, so it could be argued that the students were reflective due to course content and structure (mindfulness training on the SCM, peer and tutor support, and scaffolding on the WhatsApp group) rather than the v-logging activity itself.

Indeed, mindfulness and reflection have significant overlap [11]. Practising mindfulness itself might have fostered more reflection. Furthermore, students self-selected a module that includes mindfulness which itself is an inward practice, so these students may be particularly receptive to reflection. This does not negate the value of studying this group as it could be argued that these self-selecting students would most benefit from this approach. It may be that different adjuncts to reflection are suitable for people with different predilections for reflection.

Finally, designing, running, and evaluating the course also fostered reflection amongst faculty [13] and our involvement will have impacted both on how we have interpreted the results and modified the course between cohorts.

How you can use this

V-logging could be incorporated in any part of a course where reflective practice is important. Trialling with a small group of students and teachers could be a gradual way to start and evaluate. General practice placements may be particularly suited given the primacy of reflection in the work and training style, as well as the safety of often smaller groups. When exploring non-traditional reflection, a choice of modality could be offered – written, audio, and video and how students respond to each of these could be evaluated.

Technical and ethical issues should be considered before incorporating any of these novel modalities, and existing design guidelines [13] may support this. Our course materials emphasised group ground rules including confidentiality and offered training in using the technology rather than assuming familiarity. We recommend that considering and constantly reviewing student screen time and psychological safety is vital when students are sharing emotive reflective content. It is not always essential to share vlogs, and this could be a way to mitigate confidentiality and emotional risk. However, if the vlogs were for personal use only, this would reduce the opportunities for vicarious learning from each other’s work.

Further work could assess the quality of reflections compared to more traditional means. It would also be interesting to identify which aspects of the course design that contributed to developing reflective skill, for example the use of v-logging itself or the accountability from

social sharing, support from the tutors, experience of being on GP placements where reflective thinking is part of the clinical process, or the personal experience of mindfulness training. It may not be feasible to weight the contribution from each of these, but it may emerge that some are less important or that the combination creates more than the parts. In summary, this study explores an emerging aspect of reflective practice: harnessing digital tools to promote richer reflection amongst medical students as they prepare for professional practice.

Abbreviations

GMC General Medical Council
SCM Special Choice Module

Authors' contributions

CG analysed and interpreted the data and led on writing the manuscript. EG ran the WhatsApp groups and JH conducted the focus groups. EG and SK conceived the study. JH and SK provided academic oversight. All authors read and approved the final manuscript.

Availability of data and materials

The data cannot be published publicly as it could compromise individual privacy.

Consent for publication

Written informed consent for publication was received in line with the Ethics Committee requirements.

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Ethics approval and consent to participate

Ethical approval was gained from the Imperial College Medical Education Ethics Committee. Written informed consent for participation was received in line with the Ethics Committee requirements.

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