

March 2, 1984

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Dear Dr. Webb:

Thank you so much for sending me the proposal "Developing a Psychodynamic Interaction Team." This is an exciting idea and one that will mesh very well, I think, with existing curriculum components--as well as provide experience that our curriculum does not now provide (and, as you note, few other medical schools do either). I will make a few comments now, with the expectation that we will talk at greater length within the next few weeks (though I will be out of town from March 8 to March 17).

1. I do not know whether you know that I was Dean of Students at the College of Medicine for five years before moving into a faculty position. During that time it was very clear to me that we were not handling students' nonacademic lives very well and that in fact we were almost encouraging them to not handle them well. Particularly distressing was the lack of opportunity for self-reflection within the medical school curriculum, save among those students unfortunate enough to do badly academically who then ironically were motivated to be more reflective about themselves and their work. Your plan to address this in your clerkship is certainly supported by the large body of student affairs literature.
2. There are a number of ways of integrating the course into the curriculum and having it supplement some of the insights of the sociomedical course. I have enclosed a syllabus for the Summer 1983 course. We can discuss at greater length how we might most fruitfully collaborate. I wonder, for example, if you had considered the possibility of having individual campus-based faculty members in appropriate disciplines be among the selected members of your interaction team?
3. My own field is communication. I would be most eager to help you in any way I could: if, for example, you wanted to use videotape playbacks for analysis as some programs do, this might be something I could contribute to your program. Spending some time at your clinic would be helpful to me

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in directing the sociomedical course and making it more relevant to the students' needs. Perhaps there are additional ways that we might contribute to your project.

4. The precise status of the program was unclear to me. Are you proposing this as a required feature of the curriculum for every student, as an elective, or as a feature of the family practice clerkship? Perhaps I just need to read the proposal more carefully, but I think this should be highlighted. Or is this an experience which is to occur out of the block of time now given to internal medicine and pediatric clerkships?
5. P 3, F (2) will need to be spelled out in more detail, perhaps in the light of current school policy, flow of information, your status as teachers in whom students can confide vs. evaluators who can alert the school to problems. Along those lines, there was some problem with the psychological testing of students a few years back with considerable concern expressed about how such tests were to be used, where the results would be stored, and so on. This may end up being a nonproblem, but I think it could be tricky. Do you have examples of how other schools with comparable programs (few though they may be) handle the use of psychological and other sensitive tests?
6. P 5, F (1) (c). I have some concern that traditional data will be used to counsel students about their selection of fields--thus because women are high in interpersonal skills they will be counselled into pediatrics and psychiatry to the exclusion of surgery, ob-gyn, etc. There is considerable evidence that this now happens, and that it is very hard on students attempting to make different kinds of choices.

Finally, just a stylistic note--you use "him/her" on p. 5 but not elsewhere. Now that women constitute 25-50% of most medical school classes, it is important to include them in the language. Again, evidence shows that language does matter: men consider women to be included in "he" and "him" but women do not feel themselves to be so included.

Again, I want to repeat what I said above: this is very interesting and exciting, and I look forward to further discussion with you.

Very sincerely yours,

Paula A. Treichler
Medicine and Speech Communication
Director, Summer Sociomedical Course

cc: H. M. Swartz, M.D., Ph.D.
enclosure
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