



Take 3

Three Questions with Medical Student Bryn Sutherland

Medical student Bryn Sutherland, who serves on the Kern Institute's Learning Environment Pillar, reflects on how Millennials view their journey through medical school and how their learning styles differ from other learners ...

As a student born in the years that classify you as a Millennial, do you think this influenced your learning style in medical school?

I do think my Millennial status has influenced my learning style. In particular, I like both technological and tangible (paper) notes/materials. I like to take some notes by hand and also augment my learning with my laptop. I prefer physical copies of textbooks rather than digital ones, although the convenience and decreased expense of digital books is nice.

Some of this is obviously my personal preference, and I know I don't speak for all students. Other students in my age group may feel as though taking notes on their computers is more helpful and have multiple devices for their learning (iPad/tablets with note-writing features, etc.). Some technological things I find really helpful in the classroom are short videos and pictures, and any way to engage the audience instead of talking at them is much more enjoyable.

I think what we like, in general, is being able to have the time and space to learn the material in a way that we know works for us. It is most helpful when instructors take the time to teach things in a variety of ways that allow people with different learning styles—audial, visual, kinesthetic—to all get something out of lecture.

Contrary to the [article](#) in *WMJ*, my personal experience is that many of my medical student colleagues do *not* prefer to work in teams and would rather study on their own while we are in the preclinical phase of our medical education. This has been very apparent in many of the small group assignments and activities over the last two years. I would suggest a main reason for this is that our success in school is primarily contingent on our ability to pass exams taken individually. While we recognize the value of working on a team, and the particular importance of this in the medical field, outcomes in the

preclinical years are determined by exam scores. Therefore, I think there is generally little perceived value in working on teams. I am curious how these interactions have been impacted by COVID.

Research suggests that Millennials prefer a more relaxed learning environment. Do you agree? Why or why not?

I do agree with this. I think that Millennial and Gen Z populations tend to disregard hierarchy for its own sake. I also think that these generations prioritize mental health and receiving/giving feedback over maintaining a strict social structure at school or work. There are so many life stressors and having a relaxed learning environment makes life less stressful for us.

What are ways faculty can connect with students in the classroom and/or clinical setting?

Employ the following characteristics in your interactions:

- Employ empathy and active listening
- Understand that times have changed since faculty were trainees/in school (even if it's only been a few years!) and this new generation of students has different challenges to overcome as well as different (mostly technological) tools to use.
- As always, take interest in us as human beings outside of medical school!

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