

How to Write a Personal Statement for a Graduate Program in Health

Brainstorm

Before you begin to write your first draft, try to take the pressure off and simply answer these questions, in writing, earnestly. Do not worry about length. If you struggle with writing the answers, try talking out the answers and recording your thoughts to later transcribe.

- What events in your life helped to shape your identity? You can include where you were born, information about your family, accomplishments, anything that you feel helped to make you who you are.
- What are your defining attributes? Share a story that highlights some of those.
- Share an example of a time when you faced a challenge, setback, or failure. How did you work to overcome it? How did it affect you, and what did you learn from the experience?
- What is your motivation for applying to a graduate health program and in what ways have you affirmed your initial inclination to become a doctor/PA/dentist? Include in your answer the influence of teachers, family, or any health care professional that helped motivate you toward this career path. Also include any unusual circumstances that have occurred that have also motivated you to make this decision (e.g., a serious illness to yourself or a family member). Identify people, events, and experiences.
- How have you grown and changed from the start of your journey as pre-health until now? Can you share a story about one of your first experiences working with patients where, perhaps, things did not all go according to plan, or a time when you considered giving up this career path? Why did you struggle? What did you learn? How did the experience help you to grow? How have you subsequently matured? What has facilitated that process? Can you also share a more recent story about working with patients that reflects the growth that you have experienced? How have you changed? How will your growth influence the way you will one day interact with your patients?
- Who will you be as a health professional? What do you want people to say about you at your retirement party? Why is this your goal, and what have you done thus far that has set you up to accomplish this? *If you struggle to answer this question, you can skip it initially. Instead, answer the other questions posed and then reflect on your responses. Look for values (compassionate, advocate, empathetic, etc.) that seem to pop up repeatedly in your writing and use them to create a statement about who you aspire to be as a health professional.*
- Is there anything else professional schools should know? This might include something special about you, a difficult circumstance that you have overcome, the reasons behind a weak semester, withdrawal from a course or absence from the university, or special or disadvantaged circumstances in your background.

As you write the answers to these questions, be sure to include some sensory details to help the reader smell, hear, taste, see, or feel what you were experiencing during any of these situations. Also, be sure to save the answers in a Word Document as they will help you to complete your self-assessment.

Reflect and Look for Highlights in Your Brainstorming

Review the results of your brainstorming. Look for the stories that are most personal, most representative of your personality, and most critical to shaping the person you are today to start honing in on what you might include in your personal statement. Keep in mind, that some of the stories that don't fit into the personal statement could be used later for the Work/Activities portion of the application or your Secondary Applications.

Your Essay Should Answer These Three Questions:

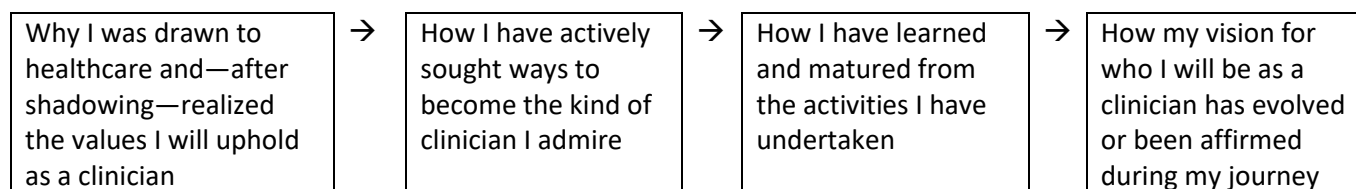
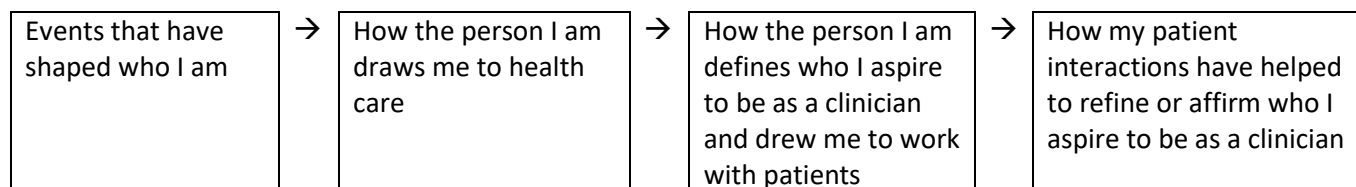
- 1. Who are you?** What events in your life helped to shape your identity?
- 2. Why do you want to be a medical professional, and especially, how you've affirmed that decision?** That is, if the first time you wanted to be a doctor/dentist/PA was when you were three, focus less on that—many three year olds aspire to work in health care—and more on how, as an adult, you have confirmed that initial inclination.
- 3. Who do you aspire to be as a medical professional?** What do you want people to say about you at your retirement party? What do you envision your values as a medical professional being? You may not have the clearest vision yet of who you aspire to be, but you want something more specific than, “I want to be a doctor.” Push that idea further to say, at a minimum, “I want to be a doctor who values _____ and works to prioritize _____.” Keep in mind that as long as you are sharing something that is true, you are okay. You don’t want or need to list all possibilities of the medical professional you might become. Schools expect that you will continue to mature throughout your formal training and that your vision will continue to shift.

Structuring Your Essay

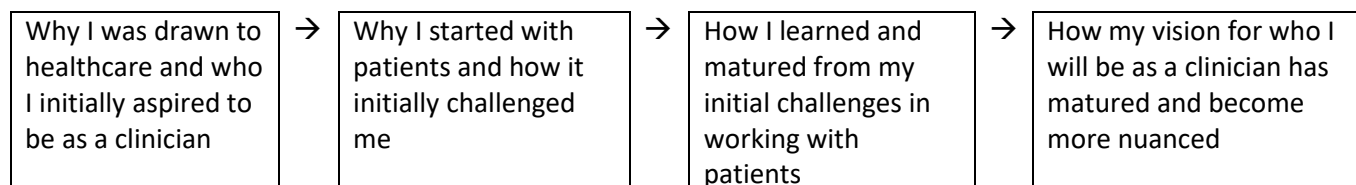
How much time you spend answering each of the above questions can vary. For example, if your upbringing really shaped you—you grew up in hardship or with a medical condition or adjusting as an immigrant—then it’s likely you will have a lot to say about who you are and how you became that way to start your essay. In contrast, if you had a fairly non-descript upbringing, you may not want to spend much time at all talking at the beginning of your essay talking about who you are. Instead, you might try to build who you are into the body of the essay.

Additionally, how you might organize your favorite ideas? Have any themes emerged? Could you use a chronological approach and chart your maturation over time?

Common structures:



A very common structure if you are stuck—as suggested by the brainstorming activity above—is to talk about who you were at the start of your pre-health journey and who you are now.



Offering a story of immature you and comparing it to mature you can help to highlight the person you have become and help you to be more relatable to readers.

Keep in mind, it is difficult to read essays where the author describes himself as being nothing short of perfect. That said, when you write about your mistakes or flaws (1) keep the story relatively brief (2) make sure the example you use is not recent (3) do not pick a particularly egregious error. Once you briefly tell about your imperfections, quickly transition to explaining how you have actively worked to improve and share an example of your getting it right. Focusing on your growth over time will typically help to answer who you are while also answering why you want to be a medical professional and how you have affirmed that decision.

Tell your story in an authentic way

In communicating who you are, it is best to show – through stories and examples – rather than to tell. Be sure to use the stories that you wrote during brainstorming to form the backbone of your essay and to include some sensory details. As you write, use a writing style that is comfortable to you. Do not feel pressure to use an abundance of adjectives or a particularly large vocabulary. Watch that people who “help” you to edit your essay aren’t taking it out of your voice. Reading essays that slip in and out of different writing styles, which is common when you are trying to force a style or you have friends rewriting your essay, is disorienting. Trust that the content of your essay will be interesting and don’t worry about making the style unique.

Fit your story within the character limits

When writing your story, start by getting your ideas down without worrying about length. Once your ideas are on paper, revisit the three questions you are trying to answer. Which parts of your essay best address them? Does the reader know who you are, why you want to work in health care and who you aspire to be as a clinician? Are you sharing your personality? Does the essay flow well? As you start to define who you aspire to be as a clinician, review your essay and be sure it works to support this idea as it often will serve as your central thesis. You can move stories that don’t fit well into the Work/Activities section and your Secondary Applications, so do not be afraid to cut.

Edit and Finalize

Have a number of people read your essay. Ask them what their big takeaways are, and make sure they are taking from the essay the things that you intend. Ask them to share if there were any unclear sections. Do not let people rewrite sections of your essay. Your voice will be lost. Instead, you should keep refining your message until those reading it are able to affirm the takeaways and major traits that you were hoping to convey. Finally, have someone you *really* trust and/or the UMass Writing Center, which is open during the academic year, help you with a final edit.

Quick Tips

- A personal statement should not be restatement of your resume or transcript with a bit more detail. The admissions committee will have your resume via the Work/Activities section. Instead, this is the space for you to tell the committee who you are beyond your resume. Again, focus on answering the three questions.
- For both the personal statement and for the Work/Activities section, a good response tells the reader what you learned by participating in an activity or from a particular experience. A great response tells the reader what you learned about yourself by participating in an activity or from a particular experience.
- Include specific anecdotes and be sure they include information about you. For example, how did *you feel* when your favorite patient grew sicker?
- Be authentic. You want to write something honest, so you do not feel the need to act like someone you are not on interview day and beyond.
- Stay away from platitudes. For example, “A doctor must always be patient and kind, making time to hear those in need.” They are either obvious and wasting space or controversial and risk offending.

Personal Statement Examples

Example 1:

It happened in a dusty Macy's parking lot. My mom asked me to grab a ten from her wallet, and I found a package labeled Suboxone. My mom saw me looking at it. With teary eyes, she slowly told me about overcoming her addiction to opiates. She had been dealing with addiction and now recovery, all alone. My heart hurt. How could I have not realized? She had always been too strong for her own good – a child of immigrants who dropped out at fourteen to raise her siblings. In that moment, I saw the pain in her eyes. The experience made it obvious to me that people should not have to cower in shame and handle adversity on their own. I realized my future would focus on medicine. I wanted to give people confidence and strength as they sought medical care by becoming a primary care provider.

Ironically, I watched my mom struggle with isolation and shame against a landscape of what many would consider to be one of the most open and proud communities in the country: Provincetown, Massachusetts. It's a place where newly-wedded gay couples skip through town, and stores display "I Love My Moms" shirts. Despite its welcoming spirit, even here, medicine has yet to find a way to uncouple shame from addiction. Moreover, my mom's situation reminds me that medicine, generally, is slow to shift its cultural norms. As a resident of P-town, it can be easy to forget that patient outcomes nationally for the LGBTQ community are still inferior to those who are heterosexual, but it is an unfortunate reality. This inequality drives me. I want to work beyond the walls of the doctor's office and to know my community truly. I want to address the medical needs of the underrepresented and underserved, empowering them to be advocates for their own health. I want to fight for equality for all people in the healthcare world.

With this driving force, I began as a volunteer at Outer Cape Health in Wellfleet, Massachusetts in 2015. I worked on their chronic pain management program, pulling statistics about opioid use in the community. In collaboration with the medical director, I compiled data that led to a grant to hire an RN case manager to monitor patients to reduce the risk of opiate addiction. While working with their medical records, I learned about the lives of patients in depth. It felt terrifying, inspirational, and, most importantly, human to understand chronic pain management not only from the perspective of how to handle these patients medically and technically but also personally. Seeing the passion that the medical director had for patients' welfare reinforced my desire to pursue a humanistic approach to medicine.

Inspired by my volunteer experience, I joined AmeriCorps VISTA upon graduation in 2017. I relocated to my service site, Montana Primary Care Association, and began to work on the Cover Montana project, which aims to increase the number enrolled in health insurance coverage. I eagerly dove into my first task, coordinating with the directors of six health centers to put on suicide awareness concerts in each rural community. It was a great idea, but I had no experience in event planning nor any clue what the communities were like. With such determination to make an impact, it took me weeks to acknowledge that I needed help. Swallowing my pride, I reached out to my supervisor and got the background information I desperately needed, including the fact that the Fort Belknap Reservation, a community to be served by one of the concerts, has six suicide attempts per week on average. With the community issues in context and ideas for large-scale planning, I was ultimately able to bring singer Jason DeShaw's message about his struggle with bipolar disorder to 400 students and 120 health center employees. The experience also taught me the importance of humility and reinforced my commitment to knowing the community that I hope to serve. These lenses will inform how I approach my work as a physician.

In general, humility has also been integral in establishing roots in these cowboy communities. While it's easy to see the differences between their conservative views and the liberal ideas with which I was raised, I learn so much from listening. I have been surprised at how easy it is to find similarities between the struggles of rural Montana medicine and that of the LGBTQ population of my hometown, both of which are frequently underserved by medicine. Belief systems differ, but when discussing access to great healthcare, the conversations are parallel: everyone deserves a voice in their healthcare. As a doctor, I will provide medicine to communities where voices have been hushed.

When I learned of my mom's addiction, it created a desire to pursue a medical career focused on delivering equality-based primary care where patients feel heard, supported, and empowered. Informed by my experiences in my hometown and in Montana, my goal is to work as a primary care provider for underrepresented communities. I've seen the challenges of this tough, yet rewarding, occupation, and I am ready to embrace a medical career. As a physician, I will provide holistic healthcare to all. I plan to change the communities I work in by laying groundwork to increase the community member advocacy in their own healthcare while providing comprehensive care.

Example 2:

A homeless woman with an extensive history of mental health issues and visits to our ER was brought into our ward after being tasered and arrested for "disturbing the peace." The nurse brusquely asked her to remove her pants for the doctor to examine the taser site. She refused. She was livid as the policemen pinned her while the nurse ripped off her pants. I caught the woman's gaze—anger, mixed with sadness, fear, defeat. After the doctor's exam, I cleaned her wounds and helped her wash up. She was still shaking. I leaned over to clean a laceration on her forehead. "Nemo?" Her eyes lit up as she caught sight of the *Finding Nemo* sticker on the back of my nametag. Her fiery exterior dissolved as we connected, sparked by our shared love for the endearing clownfish. Security left, and the police squad dwindled to one. I brought her some juice, and we continued to chat amicably, her blood pressure quickly normalizing. When it came time to leave, she teared up as she thanked me and invited me to the movies to see *Finding Dory* with her. I left my shift elated that I could offer this patient some form of healing—a human connection.

Though this is her story, it is not unique. This is the story of every patient with whom I have interacted. People who are not just patients, but humans, humans whose illnesses are manifestations of biological and social influences and whose experiences of illness are mediated by culture, society and personal circumstance. Since my first immersion in the medical field at age 17—a mission trip to rural Nicaragua with Tufts Medical School—these lessons have been clear. As I triaged patients, took medical histories in Spanish, learned to perform pelvic and rectal exams, wrapped injuries, and took on any other tasks with which they entrusted me, I discovered my niche in medicine. With our limited resources, many times all we could provide was temporary relief; however, being there as a compassionate listener and a witness to their pain, I provided another form of healing entirely. I watched as a woman with chronic asthma was sent home after a nebulizer treatment only to return home to cook dinner in the unventilated oven that likely caused the asthma. Situations like this made me realize that healing involves more than treating symptoms—it necessitates a contextualized and personalized whole-body approach.

When I returned, I channeled my inspiration into volunteering in the ER and reading voraciously, particularly the work of Dr. Paul Farmer. At UMass I grew fascinated with organic chemistry reactions, biomolecules, and organ systems. I studied social determinants of disease, social justice, and inequity in health and healthcare eager to translate those learnings into practice when caring for patients. I became certified as an EMT and started working in EMS and as a technician in the ER. I volunteer with the elderly, the homeless, and people with mental and physical disabilities not only to gain insight into how they perceive and experience their health but also because I genuinely enjoy it. My patients and companions at volunteer sites reinforce my love of caregiving and remind me to value each person's unique history as a path to understanding their suffering and promoting healing. No matter how exhausted I am after a 24-hour shift or how grimy I am after a night spent being puked on by intoxicated concert attendees, I leave invigorated by the intellectual challenge and raw humanity innate to the field of medicine and fueled by the incredible people I connect with.

I thrive under the pressure of running a code in the back of an ambulance, working as a team to care for critical patients, and tending to patients in the chaotic ER. Yet I know the importance of spending an extra moment with a patient, sharing a joke, holding their hand on the trip to the hospital. I have struggled to adjust my desire to spend unlimited time at the bedside of each patient to accommodate the fast-paced environment and competing priorities characteristic of emergency medicine. To that end, I am finding a balance in which I can forge a personal connection

with each patient while tending to all patients in an efficient manner. Above all, I know that there is always time to treat patients with kindness, understanding and respect.

I now have the privilege of working as a research assistant in Paul Farmer's department at Harvard Medical School, studying multi-drug resistant tuberculosis and global health equity. I am inspired daily by brilliant researchers who are dedicated to bringing healthcare to the patients who are most vulnerable. Similarly, I aim to dedicate my career as a physician to providing care to those who need it most.

Every day we are exposed to people's pain. As fascinating and educational as an exotic virus or abdominal aortic aneurysm is, our patients are more than the host of a pathogen or the canvas of a medical mystery. As I look forward to a career as a physician, I will preserve patients' dignity and respond to their suffering with compassion, an open mind and a comprehensive approach to healing, whatever that may be. I am thrilled to dedicate a lifetime to learning the science and art of medicine and healing, and I vow never to lose sight of my motivation: the service of humanity.

Example 3:

"Ahoy, matey! Time to swab the tooth deck!" In response, I – at age 6 – eagerly hopped down from my chair and strutted across the waiting room. As I approached the bandana-clad swashbuckler, the guise began to fade, but my excitement had just begun. The buccaneer, my dentist, removed his costume to reveal his pristine white scrubs. The check-up was not prolonged by cavities but my insatiable curiosity regarding each procedure. From here, my infatuation with the field of dentistry only grew. Playing off of my childhood obsession with pirates, Dr. Dave, my pediatric dentist, alleviated any potential fear and allowed my natural fascination with the profession to manifest.

After the appointment, Dr. Dave told my mother he had never seen a patient display such a prominent interest in dentistry and offered a shadowing opportunity once I turned 16. Needless to say, Dr. Dave received a call from me on my 16th birthday. In shadowing Dr. Dave, my most important conclusion was that although most dentists have similar skill sets, the greats distinguish themselves via their interactions with patients. The mouth is a very personal space and, as such, requires a solid relationship and an approach specific to that individual.

As a child, this task of putting others at ease seemed simple; however, I have come to see the finesse required to do this well. In particular, when I started working as a chemistry tutor, I assumed that I had excellent communication skills. My ego, however, was taken down a few pegs when I saw one of the first students I tutored, an international student, working with a different tutor only a day after he had come to work with me. I could overhear his session a bit and realized they were going over the same content I had attempted to cover. After an evening of feeling frustrated and defeated, I decided to ask my supervisor for some advice. She walked me through some ideas for working better with non-native-English speakers for future appointments—write down key concepts, speak slowly, and check for understanding. I worked diligently to internalize her suggestions. In time, I found that I was tutoring a higher proportion of international students than many of my peers; they were requesting me intentionally. I learned from this experience the importance of humility and asking for help. It also cemented the idea that—whether tutoring or trying to put someone at ease more broadly—I need to listen and ask thoughtful questions.

Growing my communication skills has been one of the many ways that the pursuit of dentistry has helped to shape me. Wanting to be like Dr. Dave, I knew that I would have to improve my manual dexterity, so I had my mom show me how to sew. I began to make traditional mini-quilts that would make any granny proud. In time, however, I began to explore improvisational quilting and found it was an amazing outlet for my creativity. Along the same lines, I knew I would need a scientific background to be a dentist, so I studied biology in college. What began as a perfunctory endeavor morphed into a passion when I took a position in Dr. Murphy's laboratory and was actually able to apply the concepts I was learning in the classroom first hand. These experiences individually have reinforced my desire to go to dental school—showing me that I truly enjoy the art and science that merge in the field of dentistry. The overall journey, however, has been even more meaningful.

My journey to dental school has pushed me out of my comfort zone and taught me how to work with people who are different from me. It has allowed me to delve into improvisational quilting and to study synaptic transmission in the lab. The process of simply applying to dental school has helped me to grow infinitely and shown me how much I can accomplish when I push myself. As such, I can only imagine how much I will develop while working in this field. My dream is to continue evolving, pushing boundaries, and thinking creatively to become a dentist who will make Dr. Dave proud. Like Dr. Dave, I want to use my love of science and creativity to put my patients at ease, letting them know that they are my top priority. Moreover, I will endeavor to keep learning throughout my career to ensure that my patients are always afforded the best possible care. Lastly, I have been practicing my pirate impersonation in case it can help.