

Academic Writing Is a Team Sport

2025 Moerschbaecher Academic Forum

Department of Orthopaedic Surgery in collaboration with the Faculty Development Committee

The Writing Coach: Supporting Others' Academic Writing with Effective Feedback





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I have no conflicts of interest to disclose.

Introductions



About me

Rachel Walden, MS, ELS

- JHU Ortho since 2014
- Dir. of Editorial Services
- Formerly at Am J Epidemiology
- Teaching & coaching writers



About me













About you

How do you identify as a writing coach?



Do you identify as...





Or...





Or...





Or...







Or all of them at times?









About you



Roles?



Challenges?



Needs?



Learning objectives

- 1. Formulate objective, actionable feedback on others' academic writing
- Develop skills to effectively coach others around their personal obstacles to writing
- 3. Use tools to enable more efficient review of others' writing



Today's agenda

- What is writing coaching?
- Five tips for writing coaches
- The coach's toolkit
- Critique an abstract
- Q & A

What is writing coaching?

(And what is it *not*?)



"Coaching's not a job, it's a privilege."

--Lee Corso Football coach ESPN Broadcaster

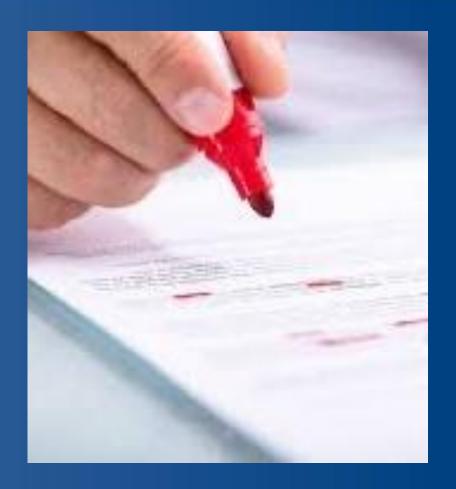


Writing coaching is...

- More than feedback on a draft
- Building skills
- Identifying & overcoming weaknesses
- Addressing the process of writing
- Helping the mentee evolve as a writer

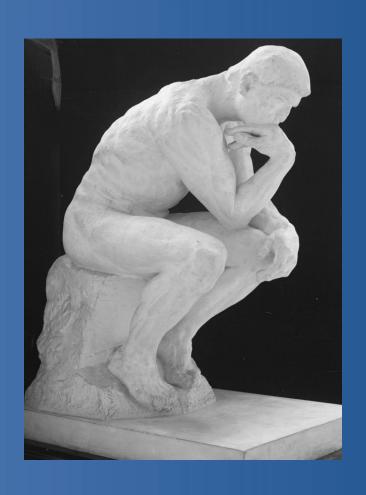
Writing coaching is not...

- Rewriting it yourself
- (Just) editing
- (Just) critique



Five Tips for Writing Coaches

Tip #1



Recognize that you may be coaching the thinking

- Is the problem with the writing?
- Or is it the logic?
- Be willing to go there

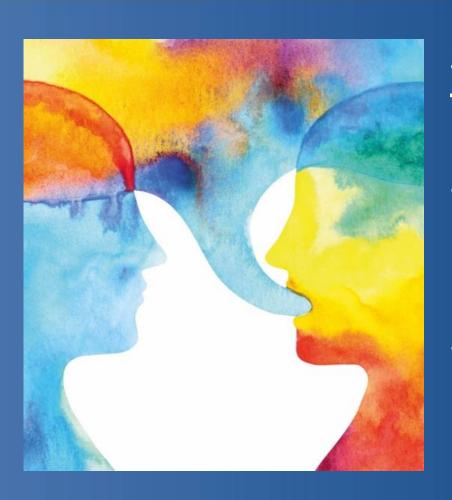


Coaching the thinking

Warning signs

- The study questions (as written) don't align with the results
- The intro is twice as long as it should be
- The conclusion could have been written before the study was done

Tip #2



Start by *talking* about the study

- Many people are more confident talking about their study than writing about it
- Goal: achieve coherence of ideas, not exact phrasing



Prompts

You have 60 seconds with a colleague at a conference.

- What new thing did you find in your study?
- Why should *your team* get this grant?

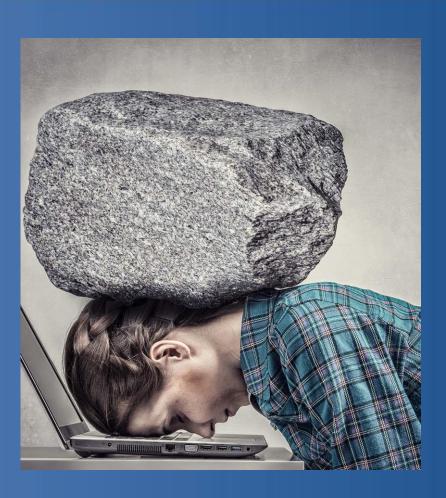


Prompts

Think about why your study matters

- Who needs to know about your findings?
- What can they do with them?
- How can your finding help others take better care of patients?

Tip #3 (this one's mental)



Address attitudes about writing

- What are the writer's underlying beliefs?
- Beliefs shape practice



A-B-C-D-E Model

- Gardiner & Kearns model
- Based on cognitive behavioral coaching
- Intervene to reshape the writer's behaviors



Steps A, B, C

When faced with an...

Activating event

The looming writing task

Writers are influenced by underlying...

Beliefs

Which give rise to unhelpful...

Consequences

Doing nothing, Doing anything else



Steps D & E

The coach can...

Dispute those beliefs



To help the writer adopt an...

Effective

...new outlook and behavior



Beliefs & disputations

Theme: Readiness

Belief	Disputation
I'm not in the mood to write	Your mood often shifts after you get started
I don't have enough time	A little time can yield a surprising amount of product
It should come naturally	All writers struggle; "naturally" is a myth

"Good writers talk themselves into writing, whether they like it or not, whether they know what to write or not, whether they like or hate what they see appearing on the screen. Keeping on, even when the writing starts ugly, is the key."

Story, Not Study (2021)
Lingard and Watling



Beliefs & disputations

Theme: Clarity

Belief	Disputation
It needs to be clear in my head first	Writing can help make things clearer
I just need to think for a bit longer	Think about what you've written afterward
I don't know how to start	Start where it's easiest: the methods?

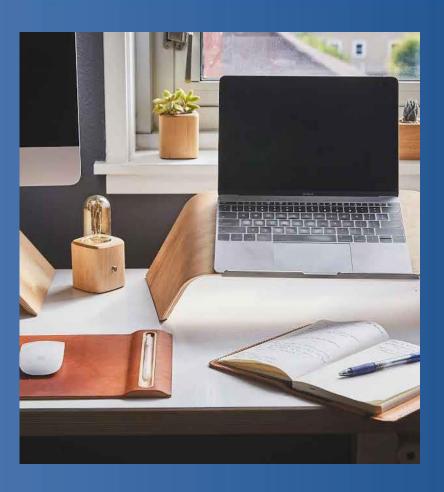


Beliefs & disputations

Theme: Quality

Belief	Disputation
It won't be good enough	You've written good work before, you can do it again
It's got a lot of mistakes	All drafts have mistakes. Focus on one thing to improve
If I share this, it will expose me as a fraud	It's called imposter syndrome. It's common

Tip #4



Talk about the conditions of writing

- Where?
- When?
- How we write can have powerful effects on our output



Where, when, & how

Regarding this	You might suggest
Where to write?	Where you're least distracted
When to write?	Morning (see: distractions)
How long to write?	45 minutes (snack vs binge)
How often to write?	5x/week
How to start?	Use a template



WAGs: increase productivity

Writing Accountability Groups

- 4-8 people
- 1 hour, once a week, 10 weeks
 - 15 min: report on prior week's activity & set goals for today
 - 30 min: write independently
 - 15 min: report on today's activity & set goals for next week

www.hopkinsmedicine.org/faculty-development/career-path/wags

Tip #5



Reflect on the coaching

- How did it go for the writer?
- How did it go for you?



Reflection

For the writer...

- Why do you feel this way about writing?
- How have you come to organize your writing projects this way?
- What are you learning?



Reflection

For the coach...

- How effective was my strategy?
- Did I amplify the writer's voice or made it sound like my own?
- What is holding the writer back, and how can we address it?

The writing coach's toolkit

The writing coach's toolkit



Designed for someone who...

- Needs to write up a clinical study
- Is intimidated by the blank page
- Wants to capture essential elements
- Only has 5 minutes to think about the manuscript today

INTRODUCTION What is known about your topic? [background] It is understood that_____ What is unknown about your topic? [hook] We do not understand_____ What question did you ask (only the main one)? [study question] Our primary question was_____

What did you think the answer would be?	[hypothesis]
We hypothesized that	
Why did you ask this question?	[clinical relevance]
The answer is important because	
Who cares about this question?	[target audience]
The findings of this study are important to	
What secondary question(s) did you ask?	[secondary questions]
Our secondary question(s) was/were	
1	
2	
3	

METHODS How did you go about asking your questions? [paragraph 1] Study design (eg, retrospective, cohort, review)_____ Data source(s) Time period_____ Location(s)_____ Who were your subjects and how many were there? [paragraph 1/2] Age?_____ Race/ethnicity?_____ Sex? Other relevant characteristics? Comparability of study groups? _____

How did you identify subjects/studies?		[paragraph 2/3]
Inclusion criteria?_		
Exclusion criteria?		
What were your outcome Primary outcome		[paragraph 2/3]
,		
3		

paragraph 3/4]
paragraph 4/5]

How did you analyze your data?	[paragraph 5/6]
Types of statistics presented	
Statistical tests used	
Statistical software (version, manufacturer)	
Alpha level?	
Power analysis?	
What kind of ethical approval did you receive?	[first or last paragraph]
IRB approval (number)	
Patient/parent consent	
Exemption	

RESULTS What were the answers to your questions? Primary question _____ Secondary questions

DISCUSSION
Provide a brief summary of your study:
How did you address your main question?
What new findings do you report?

Which other studies have investigated this topic?		
Study 1		
Study 2		
Study 3		
Study 4		
Study 5		
Study 6		
How is your study stronger/different than others?		
(Compare with studies listed above.)		
How do your results compare with other studies?		
(Compare with studies listed above.)		

 these the results you expected? If not, what possible mechanisms are at play?
 are the implications of your findings?
For patients For clinicians
For other researchers
For society
Other

What were the strengths and limitations of your study?
<u>Example</u>
Limitation: Our sample size was small
Importance? We may have failed to detect significant differences
Justification? The sample size is reasonable given the rarity of the condition
Limitation 1:
Possible effects?
Justification?
What questions remain unanswered?
Future research should focus on



Step	Task	Mins
1	Assess content (high-level review)	20-25



Step	Task	Mins
1	Assess content (high-level review)	20-25
2	Briefly assess style/form	5-10



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3	Draft note to author requesting revision	5-10



Step	Task	Mins
1	Assess content (high-level review)	20-25
2	Briefly assess style/form	5-10
3	Draft note to author requesting revision	5-10
4*	Author revises per guidance	

P.S. Give them a deadline.

^{*}Repeat as needed.



Step	Task	Mins
1	Assess content (high-level review)	20-25
2	Briefly assess style/form	5-10
3	Draft note to author requesting revision	5-10
4*	Author revises per guidance	
5*	Review revision, provide feedback	25-30

^{*}Repeat as needed.



Step	Task	Mins
1	Assess content (high-level review)	20-25
2	Briefly assess style/form	5-10
3	Draft note to author requesting revision	5-10
4*	Author revises per guidance	
5*	Review revision, provide feedback	25-30
6	Review in detail for style/form	30-45

^{*}Repeat as needed.



Step	Task	Mins		
1	Assess content (high-level review)	20-25		
2	Briefly assess style/form 5-10			
3	Draft note to author requesting revision	5-10		
4*	Author revises per guidance			
5*	Review revision, provide feedback	25-30		
6	Review in detail for style/form	30-45		
7	Author revises per guidance			

*Repeat as needed.

Give them another deadline.



Step	Task	Mins
1	Assess content (high-level review)	20-25
2	Briefly assess style/form	5-10
3	Draft note to author requesting revision	5-10
4*	Author revises per guidance	
5*	Review revision, provide feedback	25-30
6	Review in detail for style/form	30-45
7	Author revises per guidance	
8	Read whole paper in detail and offer final input	45-60

^{*}Repeat as needed.



Element	Description	
Clarity	Making sense, the first time it's read	



Element	Description		
Clarity	Making sense, the first time it's read		
Cohesion	Sticking together, logical		



Element	Description
Clarity	Making sense, the first time it's read
Cohesion	Sticking together, logical
Consistency	Avoiding synonyms; compatibility



Element	Description		
Clarity	Making sense, the first time it's read		
Cohesion	Sticking together, logical		
Consistency Avoiding synonyms; compatibility			
Conciseness Expressing much in few words			



Element	Description
Clarity	Making sense, the first time it's read
Cohesion	Sticking together, logical
Consistency	Avoiding synonyms; compatibility
Conciseness	Expressing much in few words
Conviction	Being persuasive



Color-coding guide

Element	Description		
Clarity	Making sense, the first time it's read		
Cohesion	Sticking together, logical		
Consistency	Avoiding synonyms; compatibility		
Conciseness	Expressing much in few words		
Conviction	Being persuasive		



Color-coding example

Title:

"An Examination of Concussion Injury Rates in Various Types of Football Helmet Models in NCAA Football Athletes"



Color-coding example

Title coded for conciseness:

"An Examination of Concussion Injury Rates in Various Types of Football Helmet Models in NCAA Football Athletes"



Rubrics

Set of 6 analytic rubrics

- Style & form
- Title & abstract
- Introduction
- Methods
- Results
- Discussion



Rubrics

How they work

- Help writer understand expectations
- Provide objective quality assessment
- Let you delegate parts of the review process to others



Rubric sample: style & form

Element	Score			
	1	2	3	4
5 Cs				
clarity	nothing is clear	some things are	most things are	everything is clear at
		clear	clear	first reading
consistency	rarely	sometimes	usually consistent	always consistent
	consistent	consistent		
conciseness	verbose	economic use	no excess words	maximum info in
		of words		minimum words
coherence	disjoined, very	most can be	all can be	elegant, effective
	hard to follow	followed	followed	whole
conviction	not convincing	convincing in	consistent	substantial depth,
		places	conviction	fullness + complexity
				of thought



Rubric sample: intro

Element Score 3 1 4 □ Overview missing □ Overview present □ Overview well □ Overview well Intro to topic, may but weak expressed, incl. novel expressed include clinical aspects aspects, prevalence □ Clinical aspects/ □ Clinical aspects / □ Clinical aspects/ □ Clinical aspects/ prevalence well prevalence weak prevalence well prevalence missing expressed, incl. novel expressed aspects □ Present relevance □ Very good present □ Very good present Why is topic relevant □ Some present missing relevance relevance relevance, incl. now, and in the secondary audience future? □ Some future □ Very good future □ Very good future □ Future relevance relevance, incl. missing relevance relevance secondary audience □ Review missing □ Review is thorough □ Review is Review and critique □ Review poor comprehensive state of knowledge □ Critique missing □ Critique poor □ Critique is thorough □ Critique is rigorous, incl. new perspectives



Rubric: IMRAD content

Section	Task	Yes	No (brief comments optional)
Intro	Necessary background/context		
	Compelling study rationale		
	Clear study question(s)		
	Testable hypothesis (if appropriate)		
Methods	Described in detail so they can be replicated		
	Statistical methods described		



Rubric: IMRAD content

Results	One paragraph per study question	
	Nothing extraneous	
Discussion	State major findings and why they matter	
	Compare/contrast/interpret findings	
	Strengths/limitations (and why they matter)	
	Conclude with the clinical/scientific relevance	

Conciseness

"I have made this longer than usual because I have not had time to make it shorter."

-Blaise Pascal, 1657





Instead of	Write
In order to	to



Instead of	Write
In order to	to
Is able to	can



Instead of	Write
In order to	to
Is able to	can
Past history	history



Instead of	Write
In order to	to
Is able to	can
Past history	history
The majority of	most



Instead of	Write
In order to	to
Is able to	can
Past history	history
The majority of	most
With the exception of	except



Instead of	Write
In order to	to
Is able to	can
Past history	history
The majority of	most
With the exception of	except
Shorter in length	shorter



Instead of	Write
Chart	Medical record



Instead of	Write
Chart	Medical record
Normal range	Reference range



Instead of	Write
Chart	Medical record
Normal range	Reference range
Status post	after



Instead of	Write
Chart	Medical record
Normal range	Reference range
Status post	after
Etiology	cause



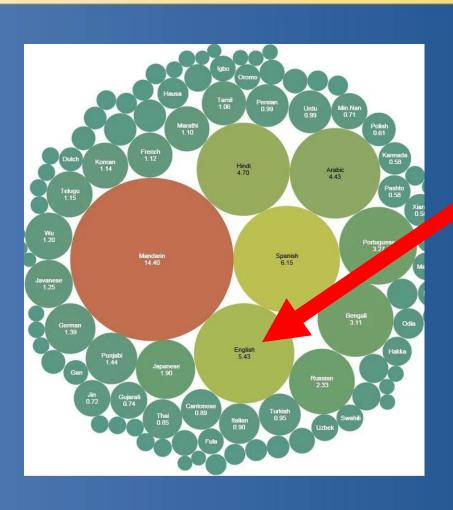
Instead of	Write
Chart	Medical record
Normal range	Reference range
Status post	after
Etiology	cause
Prepped	prepared



Instead of	Write
Chart	medical record
Normal range	reference range
Status post	after
Etiology	cause
Prepped	prepared
Mortality	death

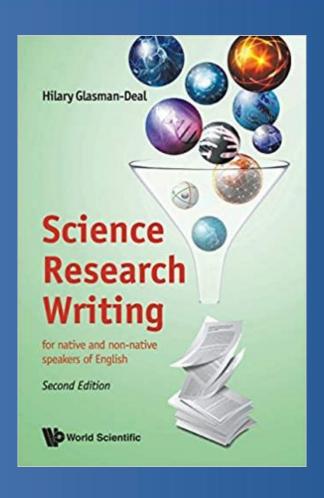
External resources I recommend

English as a proportion



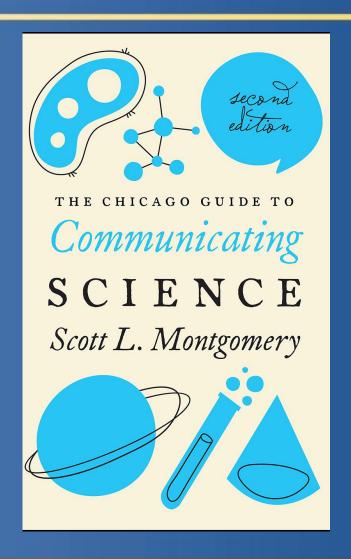
- About 5% of world population speaks
 English natively
- Non-native writers are impressive
- Tailored resources can support

Book resources



- Book for non-native English speakers
- Focuses on each section of the paper
- Vocab/grammar
- FAQs

Book resources



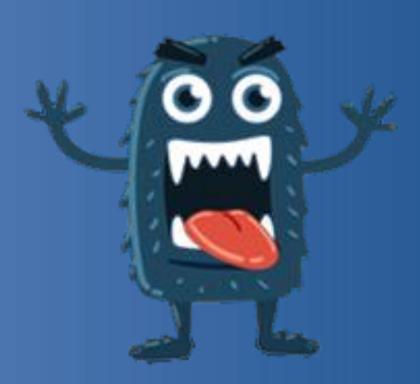
- Addresses
 numerous types of
 writing
- Provides many examples
- Targets all levels of writer

Online resources



- Purdue OWL (Online Writing Lab)
- Grammar, mechanics, punctuation
- Exercises, including
 ESL
- owl.purdue.edu

Online resources



- Grammar Monster
- Free English lessons & tests
- Vocab builder
- YouTube channel
- www.grammarmonster.com

Apply what we've learned

Critique an abstract using a rubric



The task

- Your writer brings you an abstract for feedback
- Use the rubric to critique
- Assign it a grade for each element
- Discuss why you assigned that grade & provide suggestions



Abstract critique

- How did you grade it?
- What did the writer do well?
- What are your biggest concerns?
- What was the effect of using the rubric?



Questions?

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