



Article

When Knowing Is Not Enough: A Situated–Dispositional Framework of Wise Professional Judgment in Medical Psychology Education

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Abstract

Medical psychology equips future health professionals with concepts for understanding health, illness, adaptation, communication, and care, but knowledge alone does not ensure sound judgment under uncertainty and value conflict. This conceptual article develops a Situated–Dispositional Wisdom Development Framework linking psychological wisdom, adaptive intelligence, and practical wisdom in medicine. Dispositional wisdom denotes the relatively enduring, modifiable organization of wisdom-related resources and generative person–situation processes. Situated wise reasoning regulates thought through monitoring of epistemic limits, uncertainty, perspectives, and self-involvement, as well as adjustment of attention, information search, confidence, and integration. Its quality concerns context-sensitive, proportionate adjustment rather than monitoring frequency. Wise professional judgment is evaluated independently through its evidential, contextual, ethical, and practical adequacy. Professional commitments constrain deliberation, while case-specific aims are specified and revised within it. Reflection, feedback, meaning-making, and varied practice are proposed as pathways through which judgment episodes may alter later readiness. Comparable immediate gains may yield different maintenance and unprompted transfer depending on how episodes are processed. Regulatory burden and recovery are considered alongside judgment quality. Broader wisdom development requires converging affective and motivational evidence. A fictional teaching case illustrates the framework, which distinguishes elicitation from development and process from outcome, yielding testable implications for wisdom-oriented medical psychology education.

Keywords: adaptive intelligence; wisdom education; situated wise reasoning; dispositional wisdom; professional judgment; practical wisdom; metacognition; medical psychology



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1. Introduction

Medical psychology occupies a distinctive position in health professions education: psychological concepts become consequential when used to interpret distress, explain behavior, communicate risk, negotiate goals, or guide action. Across institutional variations, its common concern is the psychological dimension of health, illness, adaptation, communication, and care. Here, medical psychology refers to curricular settings in which psychological science is taught to medical and other health-profession learners for use in these dimensions of care. The educational task extends beyond knowing more psy-

chology to judging when a concept is relevant, how confidently it can be applied, whose interpretation is missing, and how its use may affect a particular person.

The biopsychosocial model challenged reductionism by locating health and illness within interacting biological, psychological, and social systems (Borrell-Carrió et al., 2004; Engel, 1977). Its educational implication concerns the form of judgment: once patients' meanings, relationships, and social circumstances are constitutive rather than peripheral, general knowledge must be interpreted in relation to a particular person and changing situation. Professional competence accordingly involves the responsible integration of knowledge, reasoning, communication, emotion, values, and reflection (Epstein & Hundert, 2002). Competency frameworks clarify expectations, but interpretation, moral attention, and professional identity remain central to using those capacities well (Cruess et al., 2014; Kumagai, 2014). Factual mastery is necessary without being sufficient.

The same problem appears in accounts of medical uncertainty. Uncertainty can arise from incomplete information, probabilistic knowledge, scientific ambiguity, or the complexity of systems and persons and may concern diagnosis, prognosis, intervention, or the meaning of available options (Han et al., 2011). More information reduces some uncertainties, but uncertainty is often an irreducible feature of responsible judgment. Education must therefore help learners distinguish justified confidence from premature closure, communicate uncertainty without abandonment, and act without pretending ambiguity has disappeared (Simpkin & Schwartzstein, 2016). Psychological knowledge is central because cognition, emotion, identity, relationships, and social context shape both the object of judgment and the judge.

The problem also concerns intelligence understood as more than decontextualized ability. Analytic ability and domain knowledge support comprehension and inference but do not determine how knowledge should be adapted to a particular person, task, and situation. Adaptive intelligence locates intelligent action within person–task–situation transactions directed toward broader flourishing (Sternberg, 2019, 2021). Medical psychology makes this relational character visible: a technically sophisticated judgment may fit available evidence yet poorly fit a patient's meanings or changing circumstances. The educational question is how learners regulate these resources within a judgment episode and become more ready to do so in subsequent encounters.

Wisdom can contribute to such an account but only when its levels are distinguished. Some traditions emphasize enduring differences in cognitive depth, reflection, compassion, emotional regulation, and common-good orientation (Ardelt, 2003; Baltes & Staudinger, 2000; Sternberg, 1998, 2003). Others examine reasoning in a particular conflict, especially recognition of epistemic limits, uncertainty, change, and perspectives beyond one's own (Brienza et al., 2018; Grossmann, 2017). Recent work treats wise thought as emerging from interactions among personal resources, situational affordances, metacognitive processes, goals, and time (Glück & Weststrate, 2022; Grossmann et al., 2025; Smith et al., 2025). The educational question is how high-quality reasoning in particular situations can become more accessible and transferable across time.

Answering that question requires more than showing that a prompt improves one response. A trait-only account leaves episode-level change underspecified; an account confined to immediate situational effects leaves their durability unexplained. Education must connect present reasoning with future readiness and connect the regulation of thought with responsible purpose and action. Intellectual humility does not determine what should be done, perspective taking does not establish which goals deserve priority, and reflection without sufficient knowledge may not support a sound professional judgment.

These considerations point to wise professional judgment as the educational aim. We use this term for an interpretation or proposed course of action that uses relevant evidence

responsibly, responds to the person's circumstances, pursues defensible aims, is feasible and accountable, and remains open to revision when warranted.

The Situated–Dispositional Wisdom Development Framework distinguishes three constructs. *Dispositional wisdom* denotes a relatively enduring but modifiable organization of wisdom-related resources and generative person–situation processes. *Situated wise reasoning* concerns the coordinated metacognitive monitoring and control of thought in a particular problem. *Wise professional judgment* is the episode-level outcome assessed against these criteria. Practical wisdom, or *phronesis*, provides a normative and action-oriented lens rather than an additional psychological mechanism.

Existing integrative models explain wise behavior through coordinated personal resources and contextual conditions (Glück & Weststrate, 2022). Recent work also connects culturally available strategies with their context-sensitive regulation through perspectival metacognition (Grossmann & Weststrate, 2026). The present framework extends these accounts by linking regulation within an episode to independently evaluated professional judgment and readiness across later encounters. Educational development concerns changes in learners' resources and how they use them: detecting relevant limitations, selecting an appropriate response, and judging when further deliberation is warranted. Its central developmental prediction is that learners with comparable immediate gains can show different maintenance and transfer when subsequent feedback and reflection connect judgment revisions to evidence, emotion, and professional purpose.

This conceptual synthesis uses theoretical and empirical sources to define constructs, develop explanatory relations, and evaluate evidence concerning elicitation, development, and transfer. Four explanatory tasks organize the synthesis: wisdom research distinguishes personal resources from situated performance, metacognitive accounts explain regulation, personality-development and transfer research inform learning across episodes, and practical-wisdom and medical-education scholarship ground the appraisal of professional purposes. Empirical findings are interpreted in relation to their designs and measures.

2. Wisdom as Disposition, Situated Process, and Adaptive Regulation

2.1. Complementary Levels of Wisdom

Psychological theories locate wisdom at complementary levels: expertise in life problems; the balancing of interests and values; and integrated personal orientation, or the quality of reasoning within a situation. Treating these levels as interchangeable obscures whether a theory explains resources, processes, or performance. Distinguishing them makes it possible to examine how they jointly support professional judgment without assuming that any one level exhausts wisdom.

The Berlin Wisdom Paradigm defined wisdom as expertise in the fundamental pragmatics of life, including factual and procedural knowledge, lifespan contextualism, value relativism, and recognition and management of uncertainty (Baltes & Smith, 1990; Baltes & Staudinger, 2000). Its performance-oriented approach centers a problem that conventional ability measures do not directly address: reasoning about matters whose facts, values, and consequences are partly indeterminate. Relevant expertise includes understanding both what is known and the contextual boundaries of that knowledge.

Sternberg's balance theory located wisdom in using knowledge to balance intrapersonal, interpersonal, and extrapersonal interests across time, through adaptation to, shaping of, and selection of environments, in the service of a common good (Sternberg, 1998, 2001). Adaptive intelligence subsequently framed performance as a person–task–situation interaction involving analytical, creative, practical, and wisdom-based resources (Sternberg, 2019, 2021). This account already incorporates normative concerns; wisdom is not an ethical supplement to an otherwise value-neutral theory of adaptation. The present framework

works within that relational and normative orientation to specify episode-level regulation and its possible educational development.

Ardelt's three-dimensional model shifted attention to the person by integrating cognitive, reflective, and affective dimensions: understanding reality and uncertainty, examining oneself and events from multiple perspectives, and sympathetic concern for others (Ardelt, 2003, 2004). It is educationally important because wisdom becomes a relatively enduring way of perceiving and responding, not merely a successful performance. It also places compassion within the construct rather than treating it as an optional supplement to cognition.

Across traditions, wisdom is associated with epistemic humility, perspectival breadth, contextual sensitivity, emotion regulation, concern beyond the self, and integration of competing considerations (Grossmann et al., 2020a, 2020b; Staudinger & Glück, 2011). However, self-report, informant, and performance measures differ substantially and cannot be assumed to assess the same phenomenon (Dong et al., 2023; Glück et al., 2013; Webster, 2003). The educational question is therefore not whether one global score rises but which level of wisdom changes, by what process, over what timescale, and with what evidence.

2.2. Dispositional Wisdom as Organized Probabilistic Readiness

Dispositional wisdom denotes the relatively enduring organization of wisdom-related resources and processes that makes wise engagement more probable across situations and time. Whole Trait Theory distinguishes the descriptive distribution of states from the explanatory mechanisms that generate that distribution (Fleeson, 2001; Fleeson & Jayawickreme, 2015). Applied to wisdom, this distinction accommodates enduring differences alongside substantial situational variability (Grossmann et al., 2019).

At the descriptive level, dispositional wisdom is reflected in characteristic levels, variability, cue sensitivity, and cross-situational patterning of wisdom-related states. At the explanatory level, it concerns the resources and recurrent person–situation processes generating those patterns. The distribution is an outcome to be explained, not an additional causal agent. Dispositional readiness therefore refers to how resources become available and coordinated in relevant situations rather than to an invariant tendency to display the same response everywhere.

This readiness includes four interdependent domains. The cognitive domain concerns an epistemic orientation toward human complexity, uncertainty, and the contextual character of knowledge rather than possession of domain content alone. The reflective domain concerns examining assumptions, interests, emotions, and biases from more than one vantage point. The affective domain concerns empathy, compassion, and emotion regulation. The motivational and ethical domain concerns whether judgment serves only self-protection and performance or also the good of others and the integrity of professional purposes. These domains draw on Ardelt, Berlin, Sternberg, and integrative models without assuming that they always cohere perfectly within a person (Ardelt, 2003; Baltes & Staudinger, 2000; Glück & Weststrate, 2022; Sternberg, 1998).

This organization can develop through experience. Exploratory, non-defensive processing of difficult events is associated with greater wisdom, although difficult experience itself is no guarantee of development (Weststrate & Glück, 2017). The developmental question is which experiences and forms of processing alter later attention, interpretation, emotion, and purpose. A history of well-supported responses may contribute to readiness, but persistent changes in that readiness must be distinguished from the continuing support provided by a familiar environment.

Dispositional wisdom should not be equated with a favorable self-description. Self-reports depend on insight and self-presentation, while performance measures depend on task affordances and scoring assumptions (Dong et al., 2023; Glück et al., 2013). Associations

of three-dimensional wisdom with emotional intelligence and wise reasoning support links between personal resources and situated performance without establishing their identity or causal ordering (Ardelt, 2025). Multiple forms of evidence are therefore needed to determine which resources change and how they support later engagement.

2.3. Situated Wise Reasoning as Metacognitive Monitoring and Control

Situated wise reasoning is conceptualized here as coordinated metacognitive monitoring and control in a specific problem. Monitoring concerns epistemic limits, confidence, uncertainty and change, the influence of emotion and self-involvement, and absent or underweighted perspectives. Control adjusts attention, information search, psychological distance, confidence, and the integration of competing considerations. These functions elaborate established operationalizations of intellectual humility, uncertainty recognition, perspective coordination, and integrative deliberation (Brienza et al., 2018; Grossmann, 2017; Santos et al., 2017).

A strategy counts as metacognitive insofar as its selection or adjustment responds to an appraisal of one's ongoing cognition. Merely listing perspectives or requesting more information does not establish such regulation. A learner might notice that an initial interpretation relied exclusively on a clinician's account, seek the patient's account to correct that imbalance, and revise confidence accordingly. The relevant evidence is the connection between detected limitation and subsequent adjustment, not the number of strategies displayed. Regulatory quality also depends on sensitivity to context and appropriate responsiveness to feedback (Bonanno & Burton, 2013). This functional interpretation is consistent with accounts emphasizing context-sensitive regulation rather than a fixed repertoire of wise responses (Grossmann & Johnson, 2025).

Process-sensitive measures address the limits of global wisdom judgments. A generally wise person may respond poorly to one conflict, while another person may reason openly in a supportive context. Event-reconstruction and scenario studies show substantial within-person variability (Brienza et al., 2018; Grossmann et al., 2016). Wisdom-related reasoning is also distinguishable from conventional intelligence and predicts adaptive outcomes beyond cognitive ability (Grossmann et al., 2010, 2013). Person-level differences matter, but wise reasoning is jointly produced by the person, the construed situation, and available cognitive and social affordances.

Self-involvement is one important determinant. People often reason more wisely about another person's problem than their own, a pattern known as Solomon's paradox. For example, a student might advise a peer to explore a patient's reasons for missing appointments yet defend an initial explanation when personally challenged in a similar encounter. Psychological distance reduces this asymmetry and improves recognition of uncertainty, change, and integration (Grossmann & Kross, 2014; Kross & Grossmann, 2012). Repeated third-person reflection can extend these gains beyond a single prompt (Grossmann et al., 2021), and situated wise reasoning is linked to lower intergroup polarization (Brienza et al., 2021). These findings support the educability of proximal processes; their persistence and generalization beyond the studied conditions remain separate developmental questions.

Metacognitive regulation is especially important under radical uncertainty, where problems are ill-defined and values may be incommensurable (Grossmann & Johnson, 2025). Yet metacognition is not synonymous with wisdom: a strategic actor can regulate cognition toward manipulative or self-serving ends. In the present framework, situated wise reasoning is conceptualized as metacognitive regulation bounded by epistemic and relational responsibilities; it remains attentive to affected persons, legitimate perspectives, and uncertainty that should remain visible. The ethical defensibility of the ends pursued

is not inferred from metacognitive quality alone and is evaluated at the level of wise professional judgment through a phronetic lens.

2.4. Relations Across Situations and Time

The framework proposes reciprocal relations between dispositional resources and situated reasoning across time. Resources shape what learners notice and how they respond to ambiguity, while situations enable or constrain their use. Instruction can therefore improve current performance without immediately changing enduring readiness. Conversely, a change in readiness may be expressed unevenly when subsequent tasks differ in demands or support. The educational problem is not to eliminate variability but to strengthen appropriate deployment across changing circumstances.

Dynamic evidence reinforces the importance of distinguishing these levels. In a year-long, multiwave study, a network model of wisdom-related features outperformed latent factor alternatives, and within-person associations differed from between-person patterns (Smith et al., 2025). These findings caution against treating correlations between people as explanations of change within a learner. Temporal models likewise emphasize the need to specify how wisdom-related processes fluctuate and develop across episodes (Grossmann et al., 2025). Whole-trait approaches provide a complementary distinction between patterns of state expression and the mechanisms that might generate their continuity or change (Fleeson & Jayawickreme, 2015; Grossmann et al., 2019).

Education can support current regulation through tasks, prompts, feedback, and norms. Development concerns whether uncertainty detection, perspective coordination, and revision remain accessible in later encounters without strategy-specific prompts.

Analytic ability supports comprehension, critical thinking supports evidential evaluation, emotional capacities support affective understanding and regulation, and empathy opens access to another person's experience. Professional commitments orient their use. The framework asks how these resources are selected and coordinated when uncertainty and competing interests prevent any one consideration from determining the response.

Domain knowledge supplies substantive content, whereas the cognitive domain of dispositional wisdom concerns an orientation toward complexity, uncertainty, and contextuality. Motivational and ethical readiness may make relevant interests salient, but the defensibility of case-specific aims remains an object of deliberation. Table 1 summarizes the roles of resources, regulation, normative evaluation, and judgment.

Table 1. Distinguishing the focal constructs and the normative role of practical wisdom.

Construct or Lens	Analytic Level	Core Question	Function and Evidence
Dispositional wisdom	Person across situations and time	What makes wise engagement more probable?	Resources and generative person–situation processes. Repeated state distributions describe their expression; broader change requires converging evidence across resource domains.
Situated wise reasoning	Person-in-situation process	How is thought monitored and adjusted here?	Appraisals of limits, uncertainty, perspectives, and self-involvement guide changes in attention, information search, confidence, distance, and integration.

Table 1. Cont.

Construct or Lens	Analytic Level	Core Question	Function and Evidence
Practical wisdom (phronesis)	Normative and action-oriented lens	What is worth doing, for whom, and on what grounds?	Professional commitments constrain deliberation; case-specific aims and proposed actions remain subject to substantive and ethical appraisal.
Wise professional judgment	Episode-level professional outcome	What interpretation or action is warranted in this case?	The final response is evaluated independently for evidential, contextual, ethical, and practical adequacy, including accountability and appropriate revisability.

Note: State distributions describe expression; independently measured resources and generative processes are candidates for explanation. Practical wisdom is used here as an analytic lens rather than as an additional psychological variable.

3. Medical Psychology as a Distinctive Context for Wisdom Education

Medical psychology is a revealing setting for the movement from knowledge to judgment because both its subject matter and its use are situated. The psychological significance of pain, adherence, avoidance, anger, dependency, or explanatory beliefs cannot be inferred from surface form alone. Similar behavior may express different histories and needs; a familiar interpretation may overlook a crucial difference in circumstances. Psychological knowledge supplies disciplined interpretive possibilities, but their relevance depends on biography, relationships, culture, illness trajectory, and the purposes of care. This is the *double situativity* of medical psychology: the phenomena being understood are context-dependent, and so is the quality of the reasoning brought to them. The person–task–situation relation is built into the judgments the field requires.

The first source of this double situativity is epistemic uncertainty. Psychological phenomena are not always directly observable or reducible to a single causal pathway. Clinical reasoning is correspondingly situated in interactions among learner, task, patient, and environment (Durning et al., 2010). Even reliable population-level evidence requires interpretation in an individual case. The learner must distinguish what is known, inferred, contested, and inaccessible. Different sources and objects of uncertainty require different responses rather than indiscriminate hesitation (Han et al., 2011). Expertise includes recognizing when automatic pattern recognition should be interrupted and deliberate control recruited (Eva, 2005; Moulton et al., 2007). The aim is calibrated action: proceeding on the best available grounds while preserving conditions for revision.

A second source is perspectival plurality. Health-related problems are interpreted by people who occupy different positions, possess different information, and bear different consequences. A patient may understand a symptom through lived disruption, a family member through caregiving burden, a clinician through diagnostic probability, and an institution through safety and resource constraints. Perspective taking in this setting is not imaginative empathy alone. It requires perspective coordination: understanding why standpoints differ, identifying what each reveals and conceals, and deciding how they should influence a responsible judgment. Patient-centered and shared decision-making traditions similarly emphasize that evidence becomes clinically meaningful through deliberation about the patient's values, preferences, and circumstances (Elwyn et al., 2012). Situated wise reasoning adds a metacognitive account of how such deliberation can be protected from egocentric certainty and asymmetries of authority.

A third source is the presence of competing goods. Health, autonomy, relief, truthfulness, trust, family responsibility, fairness, and responsible use of resources may all be legitimate yet not simultaneously maximizable. Psychological interpretations can, themselves, advance one value while threatening another. Naming avoidance may improve conceptual accuracy but weaken alliance; pressing for behavioral change may reduce risk but disregard the person's current capacity; normalizing distress may relieve shame while obscuring danger. Such tensions cannot be resolved by technical knowledge alone because they concern what should count as a good outcome in this case. Sternberg's emphasis on balancing interests and practical-wisdom traditions in medicine converge here: judgment is wise only when cognitive adequacy is joined to defensible purposes (Kaldjian, 2010; Sternberg, 1998).

A fourth source is emotion and self-involvement. Psychological material can evoke fear, impatience, rescuing impulses, moral condemnation, helplessness, or overidentification in learners and practitioners. These responses are not external noise. They alter attention, causal attribution, tolerance of ambiguity, confidence, and the range of options considered. Epstein's (1999) account of mindful practice therefore treated attention to one's own mental processes as a condition of competent care. Wisdom-oriented education extends this insight by joining monitoring to control: learners must notice how emotion and identity are shaping a judgment, then regulate their influence without either allowing them to dominate or pretending that professional reasoning is affect-free.

These features make medical psychology a formative space in which learners encounter the epistemic, interpersonal, and ethical structure of practice before assuming full responsibility for its consequences. It belongs to a longer trajectory involving clinical experience, role models, professional communities, accountability, and reflection on outcomes (Kaldjian et al., 2023; Plews-Ogan, 2025). Its educational contribution is to make uncertainty, perspective, self-implication, and value conflict explicit objects of practice where psychological knowledge first becomes consequential for judgment.

4. From Wise Reasoning to Wise Professional Judgment

Situated wise reasoning concerns how thought is regulated, whereas professional education must also evaluate where that regulation leads. A learner can acknowledge uncertainty yet avoid deciding, display humility yet miss a dangerous possibility, or construct a compromise that is convenient but ethically indefensible. Regulation is therefore a proposed process supporting wise professional judgment, not an adequate substitute for evaluating the judgment itself.

Practical wisdom, or *phronesis*, supplies a normative and action-oriented vocabulary for this evaluation. Contemporary neo-Aristotelian accounts examine how scientific understanding, professional commitments, emotion, motivation, and the singularity of the patient are integrated in responsible action (Kristjánsson, 2015; Pellegrino & Thomasma, 1993). Empirical work with students and physicians depicts practical wisdom as deliberative, goal-directed, context-sensitive, person-centered, and joined to motivation to act (Kaldjian et al., 2023). Recent analyses likewise describe an integrated capacity organizing perception, goals, virtues, emotion, and deliberation (De Caro et al., 2025; Jotterand et al., 2025; Kaldjian et al., 2026; Nusbaum, 2025). This multidimensionality matters because appeals to practical wisdom explain little when its relations to other capacities and to specific purposes remain unspecified (Jameel, 2025; Miller, 2025). The present framework uses *phronesis* analytically as a normative lens without claiming to exhaust this wider conception of agency.

Kristjánsson and Fowers (2024) develop this integrative conception through four functions: recognizing ethically salient features (constitutive), coordinating conflicting

demands (integrative), orienting action through an understanding of a flourishing life (blueprint), and bringing emotion into relation with reason (emotional regulative). Their model connects professional purposes with the capacities through which they are pursued. The present framework shares that concern but organizes its explanation across personal resources, situated reasoning, evaluated judgment, and subsequent development. Instruction may affect one level without equivalent change in the others. The accounts are complementary: the phronesis model articulates functions of responsible agency, while this framework traces how a judgment episode may become a resource for later encounters. Broader practical-wisdom measures and independent evaluation of particular judgments offer complementary evidence.

Wise professional judgment concerns the adequacy of an interpretation or proposed action, evaluated independently of the reasoning process that produced it. The five criteria introduced above connect understanding to a responsible direction for action. A reliable capacity for such judgment must be inferred from repeated episodes rather than from a single successful response.

Professional commitments constrain deliberation, but case-specific aims are specified and may be revised within it. Commitments to avoiding harm, respecting agency, and attending to those affected do not dictate a complete ordering of goals in every case. The learner must determine which interests are relevant, how they conflict, and what priority can be justified. Thus, an aim's defensibility is an object of appraisal, not a prevalidated input. A justified judgment can also preserve disagreement among legitimate options; ethical adequacy does not require convergence on one preferred answer.

Wise professional judgment is neither purely cognitive nor purely moral. It can fail because evidence is misunderstood, circumstances are ignored, important voices are excluded, or efficient means serve an indefensible purpose. Responsiveness to a particular person requires explanation of how general evidence bears on that person, not abandonment of evidential standards. Openness must culminate in an action-guiding response, while revisability preserves accountability to new information and changing circumstances. Revisability is calibrated commitment rather than indecision.

Revisiting Pellegrino and Thomasma's account of clinical judgment, [Trimble and Croskerry \(2026\)](#) connect diagnostic interpretation, appraisal of feasible responses, and ethical deliberation about care for a particular patient. They argue that contemporary cognitive accounts have often concentrated on diagnostic reasoning at the expense of its relation to ethical judgment. Medical psychology can support their reconnection because psychological understanding bears directly on how persons interpret options, experience agency, communicate values, and participate in decisions.

Wise professional judgment draws on clinical reasoning, shared decision making, and reflective practice when no rule alone determines responsible action. It is a professionally situated expression of adaptive intelligence: evidence and cognitive resources are deployed in response to changing person–task–situation demands, with accountability to the interests and consequences that make adaptation worthwhile ([Sternberg, 2019, 2021](#)).

5. The Situated–Dispositional Wisdom Development Framework

The framework links two educational targets: responsible judgment within an episode and readiness across later encounters. Personal resources and task conditions shape regulation, which informs a judgment evaluated on independent criteria. Feedback and subsequent processing may then alter how learners approach later situations, including those in which the original support is absent.

5.1. Wisdom-Eliciting Situations

A wisdom-eliciting situation is open without being unstructured. It provides sufficient information and disciplinary constraint for rigorous analysis yet requires more than retrieval of a predetermined answer. Evidence may be incomplete, plausible interpretations may compete, and a defensible response may require coordination of different perspectives or goods. Questions about assumptions, uncertainty, omitted voices, changing circumstances, and the purposes of care then become functionally relevant rather than ornamental additions to a knowledge test.

The educational value of openness is proposed to depend on adequate scaffolding. Ambiguity without conceptual resources may elicit anxiety, unsupported opinion, or disengagement. Tasks should preserve evidential standards and make room for revision while remaining within the learner's developing competence. The role of scaffolding can be examined by comparing similarly demanding open problems that differ in instructional support. A well-defined problem may warrant an efficient answer; unnecessary deliberation is not, itself, wiser performance.

5.2. Activation of Situated Wise Reasoning

Situated wise reasoning is the proposed proximal mechanism within these situations. Monitoring identifies a mismatch between the current representation and the demands of the problem: confidence exceeds the evidence, a perspective has been excluded, or self-involvement narrows attention. Knowledge supplies expectations against which a discrepancy becomes visible, reflective resources help expose assumptions, and affective concern makes the patient's experience salient. Professional commitments determine why an omission matters. An external correction or an internal recognition can therefore initiate regulation, but a feeling of doubt alone does not identify what needs to change.

The identified difficulty guides the response. Missing information may call for inquiry, incompatible perspectives for comparison, and self-protective emotion for psychological distance; competing purposes require deliberation about what is worth pursuing. These demands may interact: acknowledging irritation can make it possible to hear a patient's objection before seeking further evidence. Control coordinates the available responses and their intensity. The resulting feedback indicates whether the learner should continue, revise the strategy, seek assistance, or form a provisional judgment. Closure is appropriate when the immediate decision has adequate grounds and conditions for reconsideration remain clear. This is a functional process account, open to testing through the sequence of information choices, revisions, and decisions.

The same activities can also become counterproductive. Adaptive monitoring tracks relevant uncertainty; hypermonitoring repeatedly checks for error without a clear purpose. Proportionate control addresses the difficulty, whereas overcontrol rigidly restricts responses or continues beyond the need. Flexible revision responds to changed grounds; repetitive doubt revisits alternatives without improving their appraisal. Context-sensitive coordination selects strategies suited to the situation; mechanical application follows a taught procedure regardless of relevance. These distinctions concern function rather than frequency: further checking may still serve safety, learning, supervision, or the therapeutic relationship. Accordingly, appropriate regulation can be demanding without being excessive.

5.3. Transformation into Wise Professional Judgment

Regulation changes how psychological knowledge is used: whether an interpretation is warranted here, which alternative remains plausible, whose interests it serves, and what action it supports. Domain knowledge supplies substantive constraints, while professional

commitments and candidate aims are examined and refined during deliberation. The result is evaluated against the available evidence, the person's circumstances, the defensibility of its aims, and the feasibility of the proposed response.

This evaluation includes a constitutive constraint: a task-critical evidential error or an ethically indefensible aim is incompatible with calling the judgment wise, however sophisticated the accompanying reasoning. The separate empirical claim is that better metacognitive regulation increases the probability of adequate judgments under uncertainty. A correct answer alone cannot establish that the proposed process occurred, and a high process score cannot establish that the final judgment was adequate.

5.4. *Reflective Consolidation and Transfer*

Judgment episodes provide material for learning through their consequences, discrepancies, and revisions. Guided reflection can reconstruct what changed an interpretation, feedback can reveal blind spots and connect reasoning to responsibility, meaning-making can relate an episode to professional purpose, and varied practice can test where learning applies. Successful, incomplete, and initially unwise judgments can all contribute, depending on how they are processed.

The TESSERA framework (Triggering situations, Expectancy, States/State expressions, and Reactions) describes personality development through recurring short-term sequences, with reflective and associative processes contributing to change (Wrzus & Roberts, 2017). Applied here, an encounter supplies a trigger, prior expectancies shape its initial construal, reasoning is enacted, and feedback and consequences provide material for learning. Explicit reflection may revise an expectation, while recurring relations among cues, responses, and consequences may make a useful response more accessible. These are proposed pathways for extending the account to wisdom education; different episodes may engage them in different combinations.

The developmental consolidation hypothesis predicts different maintenance and transfer after comparable initial gains, depending on how episodes are processed. Varied practice may help learners distinguish situations calling for similar regulation from those requiring a different response. Transfer should therefore be specified by changes in task demands, context, and retrieval cues (Barnett & Ceci, 2002).

Feedback exposing an overlooked patient concern can unsettle the expectation that disagreement merely reflects insufficient explanation. Reflection examines how evidence, emotion, and assumptions shaped that interpretation; meaning-making connects the revision to the kind of practitioner the learner seeks to become. Varied practice then tests when this understanding applies and when a different response is needed. Such learning may alter attention, emotional responses, and professional purposes, as well as access to reasoning strategies. It would be expressed in more appropriate unprompted reasoning, broader reach across relevant situations, and recovery from premature closure. Fluent reflection that still depends on a teacher identifying the difficulty remains tied to the original support.

5.5. *Reciprocal Influence and Contextual Conditions*

At episode t , dispositional resources and generative person–situation processes shape what learners notice and how they regulate a judgment. Processing that episode may alter the readiness brought to episode $t + 1$. Context remains active throughout: evaluation anxiety, hierarchy, identity threat, and pressure for certainty may constrain regulation, while psychological safety, instructor modeling, and permission to revise may support it. These conditions shape both performance and the opportunities through which an encounter becomes material for development.

Comparable judgments may involve different cognitive effort, emotional strain, and continuing preoccupation, affecting engagement in the next encounter. Recovery research links opportunities to unwind with later well-being and functioning (Sonnentag et al., 2022). Workload, supervision, and recovery opportunities therefore matter alongside personal readiness. Necessary learning may be effortful, and ethically justified decisions can remain painful (Kristjánsson & Fowers, 2024). The developmental aim is responsive, sustainable regulation, not simply less effort. Improved performance after rest differs from learning that changes enduring readiness. Figure 1 summarizes the judgment–development relation within these continuing contextual conditions.

Within an episode (t)

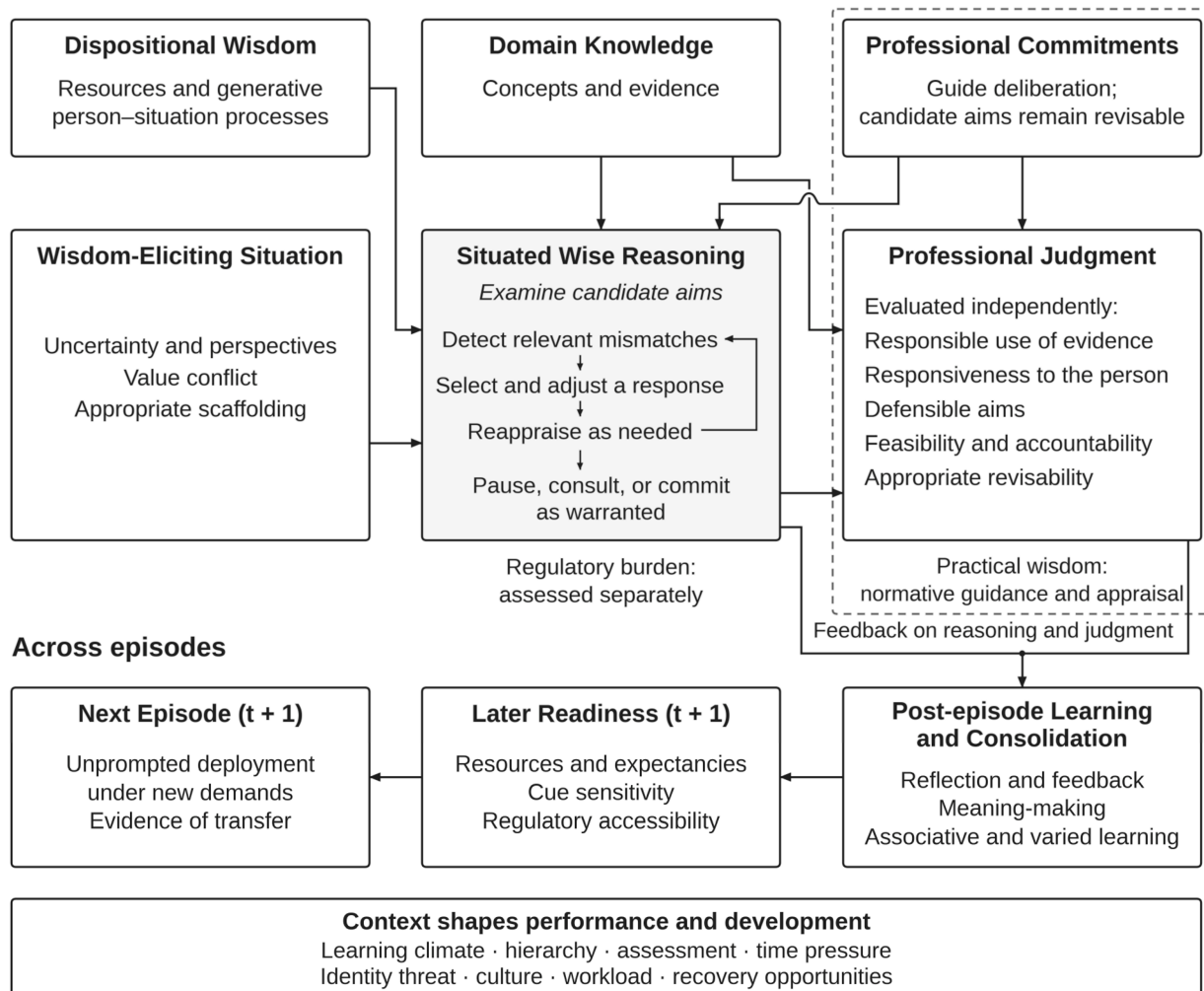


Figure 1. The Situated–Dispositional Wisdom Development Framework. Note: Solid arrows denote proposed relations, not established causal effects. The light grey shading highlights the situated wise reasoning process. Within episode t, regulation recurs as warranted and permits pausing, consultation, or provisional commitment. The dashed enclosure marks practical wisdom as normative guidance and appraisal; candidate aims remain open to scrutiny during deliberation. Judgment quality is rated independently of process scores, and regulatory burden is assessed separately. Feedback on reasoning and judgment, including incomplete or initially unwise judgments, may inform consolidation across episodes. Later readiness is evaluated through unprompted responses in new situations. Context, including workload and recovery opportunities, shapes performance and subsequent engagement.

6. A Pedagogical Architecture for Wisdom-Oriented Medical Psychology

The framework implies a recurring pedagogical movement from encounter through self-distancing, perspective coordination, and integrative deliberation to consolidation. Prior work establishes grounds for addressing wisdom-related capacities intentionally in education (Bruya & Ardelt, 2018; Huynh & Grossmann, 2020; Sternberg et al., 2007). These are instructional functions rather than a fixed protocol: discussion, simulation, narrative work, and reflective writing can realize them differently. The distinctive requirement is that learners form a judgment and examine how its representation, confidence, and justification changed, with support progressively withdrawn as competence develops.

For example, Bruya and Ardelt (2018) followed 131 students in five wisdom-oriented introductory philosophy classes and 176 students in seven comparison classes across a semester. Self-reported three-dimensional wisdom increased in one wisdom curriculum, remained stable in the other, and declined in the comparison classes. These findings provide preliminary support for educational development and suggest that outcomes may vary across curricula; professional judgment itself was not measured.

Encounter makes an initial representation available for examination. A psychologically meaningful problem should preserve enough uncertainty for learners to commit to an interpretation, indicate confidence, and identify grounds for that confidence. Revealing a preferred explanation too early can turn judgment into conformity. The teacher's task is to provide sufficient conceptual support without prematurely closing the space for reasoning.

Self-distancing makes emotion, professional aspiration, and status concerns available for examination through third-person reflection, by advising another practitioner, or by taking a future vantage point. Grossmann et al. (2021) conducted two preregistered longitudinal experiments involving 555 adults. Month-long third-person diary reflection improved wise reasoning about interpersonal challenges; a week-long experiment replicated the benefit relative to first-person and no-pronoun conditions. These findings extend earlier psychological-distance interventions (Grossmann & Kross, 2014). In teaching, distancing can help learners use emotion as information when self-involvement constrains thought, while remaining engaged with the patient's concerns.

Perspective coordination goes beyond enumeration. Learners examine what each participant knows, values, controls, and risks and how power affects whose account is treated as credible. Narrative approaches can support attention to temporality, meaning, and voice (Charon, 2001). Coordination does not require equal weighting of every perspective. It requires explaining which information or interest matters to the case, what uncertainty remains, and how the judgment changes when an overlooked account is considered.

Integrative deliberation connects this revised representation to a defensible response. Learners distinguish evidence from inference, articulate competing aims, evaluate feasible alternatives, and explain the grounds for action. Confidence and the conditions for revision remain explicit, but openness is not an endpoint. A justified response can acknowledge unresolved uncertainty while stating what should be done now and why.

Consolidation connects the episode to later use. Learners compare initial and revised judgments, receive feedback, and consider when the same regulatory move would be appropriate. Guided reflection can connect evidence, emotion, values, and consequences to future action (Mann et al., 2009; Sandars, 2009). Later tasks should vary demands and gradually remove prompts; portfolios can document learning, while unprompted performance tests its transfer.

A fictional rehabilitation conversation illustrates these instructional functions. In a simulation, a medical student meets a patient with persistent back pain who has missed two appointments. Overgeneralizing the concept of pain-related avoidance, the student interprets the absences as low motivation and prepares to explain why participation matters.

Concern for the patient coexists with a wish to demonstrate competence. The patient asks, “You keep telling me to attend, but do you know what it costs me?” The student feels criticized. The tutor asks, “What would you advise another student who felt criticized here?” Stepping back, the student recognizes that the patient’s understanding of pain and circumstances remain unexplored.

The student asks what makes attending difficult. The patient’s account reveals fear about pain, lost wages, and transport problems, changing the initial explanation. The aim shifts from securing attendance to agreeing on feasible care. With supervision, the student proposes checking the patient’s pain concerns and activity limits with the clinical team, exploring appointment times or coordinated visits that could reduce lost wages and travel, and agreeing when to review the options with the patient. Clinical options remain provisional until the team has assessed them. This plan can be evaluated against the five judgment criteria independently of the amount of reflection displayed.

Afterward, the tutor and student compare the initial explanation with the patient’s account, examining the role of defensiveness in the initial response and the professional responsibility to understand attendance barriers. Later practice varies the reasons for apparent nonadherence and gradually removes prompts. In a later simulation without tutor prompts, the student might ask a readily agreeing patient to explain the plan and discover a misunderstanding. In another, the patient understands the options but gives greater weight to work or family responsibilities. Exploring feasible alternatives without treating this informed preference as misunderstanding would show a different appropriate response. Such discrimination, with justified plans in both cases, would support transfer beyond the original exchange. Table 2 links these instructional functions to illustrative teaching moves and questions for discussion across encounters.

Table 2. A teaching roadmap for wisdom-oriented medical psychology.

Instructional Function	Illustrative Teaching Moves	Questions for Discussion
Encounter	Provide relevant concepts and an open case. Invite an initial interpretation and its grounds before offering a preferred explanation.	What is known, inferred, and still uncertain? What supports the learner’s interpretation and confidence?
Self-distancing	When self-involvement constrains thought, ask what the learner would advise another student facing the same situation.	How are emotion or concerns about competence shaping the interpretation? Does stepping back enable inquiry while sustaining concern for the patient?
Perspective coordination	Elicit the patient’s account and compare what relevant participants know, value, and risk, including whose voice may be overlooked.	Which information and interests matter here? How should differing accounts and priorities inform the judgment?
Integrative deliberation	Ask learners to justify a next step by considering evidence, competing aims, feasible options, appropriate consultation, and conditions for reconsideration.	Does the proposal meet the five judgment criteria? Is there sufficient reason to proceed, or is further inquiry or consultation needed?
Consolidation	Compare initial and revised judgments, connecting feedback to evidence, emotion, and professional purpose. Vary later cases and gradually withdraw strategy prompts.	What changed in the learner’s understanding? When is a similar or different response warranted? Can this learning guide a later encounter without strategy prompts?

Teachers shape learning norms by showing how experts notice doubt, seek another perspective, and revise a conclusion while retaining responsibility. A hidden curriculum

rewarding hierarchy or infallibility may undermine reflection and person-centered care (Hafferty, 1998). Supportive norms may improve classroom performance; later encounters under changed conditions test whether learning persists.

7. Assessment and Empirical Evaluation

Assessment must distinguish process, episode-level outcome, and longer-term change. Situated wise reasoning can be examined through event reconstruction and scenario responses, supplemented by confidence judgments, information-search choices, and traces of revision (Brienza et al., 2018). The central process evidence links monitoring to control: a recognized limitation is followed by an appropriate adjustment. Repeated tasks and occasions are needed because the opportunities for these processes vary across situations.

The episode-level outcome is wise professional judgment. Ratings should apply the five criteria: responsible use of evidence, responsiveness to the person's circumstances, defensible aims, feasible and accountable action, and appropriate revisability. Rubrics should specify consequential errors and acceptable alternatives beforehand. Domain experts and, where appropriate, patient or stakeholder representatives can help develop them without requiring a single preferred answer. Final responses should be rated without access to process scores, with both agreement and substantive disagreement reported.

Articulated reasoning does not establish online metacognitive regulation. Sequential confidence reports and information-search records can show whether a detected limitation preceded adjustment. Think-aloud methods may help but can alter the observed process; fluent or lengthy verbalization should not be required. Process coding should concern the monitoring–adjustment relation given the information available at each decision point, and outcome coding should concern the final judgment's adequacy. Separate response components, independent raters, and temporal ordering help limit criterion contamination.

The distal target requires two levels of inference. More appropriate and less prompt-dependent reasoning across later situations supports development in reasoning readiness. It does not, by itself, establish change in all cognitive, reflective, affective, and motivational domains of dispositional wisdom. Broader claims require converging indicators of those resources, such as compassion, emotion regulation, and ethical motivation, together with performance beyond the trained task family. Improvement confined to medical psychology supports a domain-bounded conclusion before it supports general personality change.

Repeated assessments should sample comparable demands, support, and opportunities to revise. Otherwise, easier tasks or a more supportive environment may change the observed distribution without a corresponding change in personal readiness. Earlier resource measures or state distributions should predict later episodes not used to construct those measures. Multilevel and intensive longitudinal designs can then separate between-person differences, within-person change, and situational influences. Transfer distance and durability should be examined as distinct dimensions, not as a mandatory sequence from near transfer to far transfer, then to trait change. A learner may become more consistently wise without becoming uniformly wise.

An evaluation could use parallel rehabilitation simulations before teaching, immediately afterward, and at delayed follow-up. Cases would provide comparable information, complexity, and response opportunities while varying patient concerns and warranted interpretations. Transfer encounters would omit strategy-specific prompts. Designers would prespecify cues and acceptable responses, such as consulting the team about unresolved activity safety, pausing clarification once the patient accurately explains the agreed next step, and reopening inquiry when the patient adds a relevant concern. Process scores would assess detection and response to these cues; separate raters would assess the final plan. Reflective accounts would follow the encounter to limit prompting. Effort, emotional

strain, and post-encounter preoccupation would be measured separately, with workload and recovery opportunities matched or documented. Performance in the next case would help test consequences of burden and recovery; assessing sustained functioning requires longer follow-up.

These assessments can test whether instruction improves judgment partly through more context-sensitive regulation. Cases would be selected through independent piloting for consequential uncertainty and room for judgment improvement. Process records should precede independently rated final judgments, while analyses consider knowledge, analytic ability, and plausible common causes of regulation and judgment. Temporal order alone cannot establish causal mediation. When regulation improves reliably, estimates excluding a prespecified meaningful contribution to judgment would challenge this proposed link.

The developmental consolidation hypothesis calls for a complementary comparison. Learners would receive common initial instruction and an immediate assessment before random assignment to two approaches. Both groups would receive the same substantive information and varied cases, with practice time and instructor attention matched. One group would reconstruct its own initial and revised judgments, using feedback and reflection to link revisions to evidence, emotion, and professional purpose. The other would use guided content review and case analysis without reconstructing those personal revision sequences. This comparison tests the combined consolidation approach; separating its components would require additional comparisons.

Delayed tasks would remove strategy-specific prompts and vary task structure or context. Compared with content review and case analysis, reflective consolidation is expected to improve maintenance and unprompted transfer, with inquiry or reconsideration when grounds for the immediate decision are insufficient and justified commitment when they are sufficient. Judgment quality would be assessed independently. Gains in domain knowledge and understanding of when reasoning strategies are appropriate would be assessed alongside whether earlier revisions inform later unprompted responses. Gains confined to prompted tasks would indicate supported performance; gains explained by knowledge alone would favor a content-learning account. With implementation verified, estimates sufficiently precise to exclude a prespecified meaningful advantage in delayed reasoning would challenge the consolidation hypothesis.

8. Discussion and Conclusions

Psychological knowledge and its wise use are different educational achievements. The first supplies concepts and explanatory possibilities; the second requires their responsible deployment in situations where evidence, interests, and consequences do not determine a response mechanically. The framework connects these achievements by separating the resources learners bring, the regulation enacted within an episode, and the quality of the resulting judgment.

The proposed contribution is a testable link across educational levels: how regulation supports an independently evaluated judgment and how processing that episode may change later unprompted readiness.

Within the normative orientation of adaptive intelligence, the framework asks how knowledge and ability are deployed across changing person–task–situation relations (Sternberg, 2019, 2021). Comparable judgments achieved with less strain may offer a separate benefit, but demonstrating sustainable professional functioning requires repeated encounters and longer follow-up.

Practical wisdom adds a complementary question: whether the aims and actions emerging from deliberation are defensible. Professional commitments guide inquiry, but their case-specific implications must be worked out with attention to evidence and those

affected. Thus, wise professional judgment is neither a count of metacognitive behaviors nor agreement with an instructor's preferred answer. It is an accountable, person-responsive, action-guiding judgment whose reasons withstand substantive and ethical scrutiny while remaining open to revision.

We must acknowledge that one of the most critical boundary limitations is that the framework remains a conceptual account whose proposed process relations require testing. Medical psychology is an especially revealing rather than unique setting, and extension beyond the considered professional domain requires evidence. The model centers on learner-level judgment rather than team-based or institutionally distributed reasoning. It evaluates action-guiding judgments, not the implementation or consequences of later actions, which need separate assessment. Cultural and institutional contexts shape salient interests and expressions of uncertainty and revision (Grossmann & Weststrate, 2026). Normative disagreement limits reliance on any single scoring procedure, and judgment criteria must remain defensible to those affected. Finally, enduring changes in reasoning readiness should not be treated as evidence of whole-person wisdom without converging evidence from its other domains.

All in all, the framework offers a way to teach and study how psychological knowledge guides judgments that no rule alone can settle. It connects feedback and reflection on specific encounters with later unprompted practice, keeping professional judgment accountable to evidence, patients, and defensible purposes.

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