

Editorial

Arts Alive and Thriving in Medical Education

Cheryl McLean, Publisher

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Arts and Humanities Gaining Momentum in Medical Education

It has been reported that the use of arts and humanities in medical education may help develop observational skills and enhance understanding of the human condition. Programs integrating the arts and humanities in medical education continue to flourish and gain momentum with leading medical schools offering programming such as Stanford School of Medicine's Program of Arts, Humanities and Medicine which has been established to "promote creative and scholarly work at the intersections between the arts, humanities and medicine in order to enhance our understanding of the contextual meanings of illness, healthcare, and the human condition." ¹ In Canada, Dalhousie University, Halifax, Humanities in Medicine, offers five core initiatives: History of Medicine; Narrative Medicine (oral storytelling film, mass media, and literature); Music; Spirituality; and Visual Arts. ² The Arts and Humanities in Health and Medicine Program at the University of Alberta was launched in May 2006. The program is directed to engendering a balance of scientific knowledge and compassionate care among students with a mission statement that formally acknowledges "the explicit recognition within the Faculty that clinical practice is both an art and a science." ³

The arts are alive and thriving in medical education today, offering opportunities for learning and a place for self expression and healing. A leader in the field of Narrative Medicine, Dr. Rita Charon, Professor of Clinical Medicine and Director of the Program in Narrative Medicine at the Columbia University ⁴ has long advocated for the use of narrative in medical education to honour stories of illness. Dr. Arthur Frank, Professor of Sociology, University of Calgary, and author of "*The Wounded Storyteller, Body, Illness and Ethics*", writes about the meaningful uses of storytelling for those experiencing illness, "The personal issue of telling stories about illness is to give voice to the body, so the changed body can become once again familiar in these stories." ⁵

Physicians Speak Out About Arts and Medicine

In issue 8 of IJCAIP "Physicians Speak Out About Arts and Medicine," we've opened the floor for physicians to share their experiences with the arts as applied in medical education.

Our featured article, "*Stories and Society, Using Literature to Teach Medical Students About Public Health and Social Justice*," has been contributed by **Martin Donohoe, MD, FACP**, Adjunct Associate Professor, School of Community Health, Portland State University and Senior Physician of Internal Medicine at The Kaiser Sunnyside Medical Centre. Donohoe offers an argument for "enhancing public

health education of medical students through the use of literature with the goal of creating activist physicians knowledgeable about, and eager to confront, the social, economic and cultural contributions to illness”. He has also generously provided an extensive list of books, articles and resources. A follow up commentary by **Jay Rosenfield, MD, MEd, FRCPC**, Vice-Dean of Undergraduate Medical Education, Faculty of Medicine, University of Toronto, stresses the need for continuing research to examine the use of literature and story in medical education further, particularly when linked to advocacy and health of populations and patient outcomes.

Maureen Rappaport MD, FCCFP, is a family doctor who splits her time between working in a busy community practice in Montreal, Quebec, and teaching family medicine residents and medical students. In the article, *“The Poetry of Practice”* she writes about the creative writing course she teaches as an elective to fourth year medical students at McGill University, a course that provides an important place for students to express their feelings through narratives and poetry.

Physician and Educator **Pippa Hall MD, CCFP, MEd, FCFP**, at The University of Ottawa, has been a palliative care physician for over ten years. She has integrated arts into learning activities for pre-licensure students and in post graduate programs as well as in continuing professional development activities in nursing and spiritual care. She explains how she has found the arts in many forms provide opportunities for learning while offering new insights into the human condition.

Seema Shah, MD, MSPH, offers a unique perspective as both a physician and patient who has experienced chronic illness. Working with The University of British Columbia Community Partnerships for Health Professional Education Initiative, she facilitated group sessions using literature and story to help teach students about the lived experience of illness.

Our closing commentary explores the exciting potential for other innovative and creative technologies incorporated into teaching and medical education. **Kim Bullock, MD**, family medicine and emergency room physician, and Director of the Community Health Division and Assistant Director of Service Learning in the Department of Family Medicine at Georgetown University, Medical Centre, Washington, believes digital storytelling in medical education has the potential to “link the social, environmental, and historical issues that influence health and illness through graphics”. “What emerges,” she writes, “are voices from the community that bear witness to issues that influence health including problems related to the environment, housing, public safety violence, inequities ..”

The voices represented in this issue of IJCAIP speak about progressive approaches to learning that have the potential to offer hope and change in education and in healthcare practice. There may yet be questions to be answered but, given the space, there will always be stories to tell and those who will witness, learn and be transformed.

Thanks to all the physicians who joined us in this issue of IJCAIP for sharing their articles and commentaries while contributing to this lively discussion about the arts in medical education.

We invite you to read the full articles available and accessible from the IJCAIP home page in HTML and PDF formats. We hope you will share these *stories* with your friends and colleagues.

Most sincerely,

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1. About the Program, Stanford School of Medicine, Arts, Humanities and Medicine, <http://bioethics.stanford.edu/arts/>
2. Dalhousie University Humanities in Medicine Program <http://humanities.medicine.dal.ca/>
3. Arts in Humanities in Health and Medicine Program, University of Alberta, <http://www.med.ualberta.ca/education/AHHM/index.cfm>
4. The Program in Narrative Medicine, College of Physicians and Surgeons, Columbia University, People/Leadership/ Rita Charon MD, Ph.D. <http://www.narrativemedicine.org/about/people.html>
5. Frank, Arthur, *"The Wounded Storyteller, Body, Illness and Ethics"*, University of Chicago Press, 1995, (pg. 21, Chapter 1)

Read more about the creative arts in interdisciplinary practice in the upcoming book "Creative Arts in Interdisciplinary Practice, Inquiries for Hope and Change" to be published by Detselig/Tameron Press, 2010, Editor, Cheryl McLean, Associate Editor, Robert Kelly. Visit the book blog: <http://www.creativeartpractice.blogspot.com>