

**IJCAIP Response Commentary***Using Literature to Teach Medical Students about Public Health and Social Justice***Interesting Approach More Research Needed**

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...There are currently some excellent reviews on the challenges surrounding the broad integration of humanities into medical education, including a recent one by Shapiro et al (1) that examined issues of content, pedagogy and placement in the curriculum. One can argue that whether it is reading literature, looking at photos, or any similar type of activity is not really what is key about the contribution of medical humanities to MD education, rather what is important is how any curriculum encourages reflection, discussion with colleagues, and awareness of multiple perspectives on health and illness. Many other activities can also accomplish this goal. As well, unless students see an immediate clinical relevance to this type of exposure, the humanities risk being seen as distinct from professional training, and only of interest to those with a penchant for this kind of study.

The author, while reviewing the numerous challenges in the American health care system today, including a myriad of worsening social injustices, fails to provide any evidence that these societal problems are linked to or influenced by medical school curricula. The term public health, which is generally understood to include such areas of interest as determinants of health and population health issues, is misrepresented instead to refer to funding sources of health care. In fact, much excellent work has been done developing public health curricula for medical schools. The Association of Faculties of Medicine of Canada has recently published a comprehensive background paper on Best Practices in Public Health Undergraduate Medical Education (2), emphasizing such areas as i) a community orientation being central to public and population health education and ii) the importance of an integrated approach across the curriculum with corresponding faculty development.

Donohoe posits that medical students need to develop more social activist skills, which can be facilitated by the use of literature. Using stories to develop these skills is an interesting idea, and should be examined further. The paper has some excellent suggestions of works of literature to be incorporated in the teaching of ethics and public health, and there is no question that literature can be a powerful motivating factor for some, but by no means all medical students. The link to improved advocacy skills though is tenuous, and the advocacy role is already well established in medical education curricula in many parts of the world, through various competency initiatives such as the CanMEDS roles (3) of the Royal College of Physicians and Surgeons of Canada. As well, the Future of Medical Education in Canada project (4) of the Association of Faculties of Medicine of Canada has recognized that social responsibility and accountability are core values underpinning the roles of individual physicians, and are also the collective responsibilities of Faculties of Medicine.

*The challenge to future medical educators is to research how various curricula such as the one suggested in the Donohoe paper link to advocacy, and ultimately to improved health of populations and individual health/patient outcomes.*

**Reference:**

- (1) Shapiro, Coulehan, Wear and Montello "Medical Humanities and Their Discontents", Academic Medicine, Vol 84 #2, Feb 2009.
- (2) An Environmental Scan of Best Practices in Public Health Undergraduate Medical Education - April 2009, Association of Faculties of Medicine of Canada  
<http://www.afmc.ca/social-public-health-e.php>
- (3) The CanMEDS Physician Competency Framework, Royal College of Physicians and Surgeons of Canada  
<http://rcpsc.medical.org/canmeds/index.php>
- (4) The Future of Medical Education in Canada Project, Association of Faculties of Medicine of Canada, 2009  
<http://www.afmc.ca/fmec/>

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