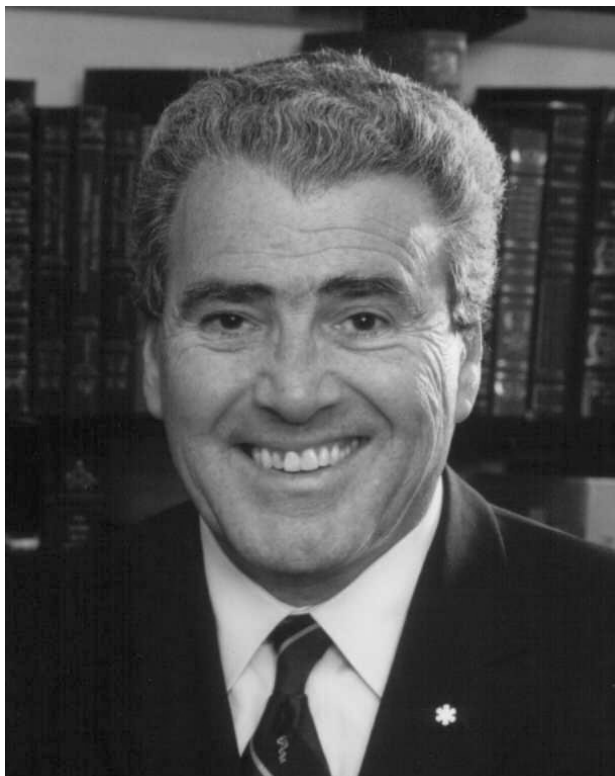


Humanities as part of the education and life of health professionals



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I was recently in a meeting with health professionals from many disciplines and discussed the concept of the humanities and how they enriched the lives and practice of physicians, beginning with the experience in medical school and then life in practice. It seemed to strike a chord with the different groups. There were nurses, physiotherapists, chiropractors, occupational therapists, speech therapists, health administrators and a dozen or more other health professionals present. Many commented on the need for a balance of the humanities with

the skills and technological expertise of their specific discipline to have a fully realized profession. I will briefly outline the approach we have taken at Dalhousie Medical School in hopes that other professions will see value in this approach to the education of a health professional.

I believe that most wish to see in their therapist a person who not only brings excellent skills, techniques and treatments but also brings personal qualities that show they are fully developed individuals. Such individuals are caring, sensitive, communicative, emotionally stable, and understanding of the human condition and the vast array of backgrounds, views, fears and hopes that each person brings to the clinical encounter.

How does the health professional become aware of the *person* who comes seeking assistance? Their training usually has been exemplary teaching them to recognize and treat a symptom or disease, but often less attentive to the broad education that would inform and educate them about the persons who come from various cultures, backgrounds, and experiences. Such understanding does not come from the course textbooks but from literature, history, poetry, social sciences, art, music, theology and other aspects of the humanities.

The humanities were not disparaged or discouraged in professional education, but more often taken for granted. It was hoped that health professionals would be broadly educated individuals, aware of the history of their field, balanced in their lives, and broadly educated so that they would be knowledgeable and sensitive to the people who consulted them, each as individual persons, with different experiences, cultures, views, aspirations and hopes.

There are two sides to the practice of a healing profession, once described as the art and the science of practice. It is evident, however, that most educational programs emphasize knowledge, clinical skill and competence, and although educators wish the person to be humanistic, empathetic and communicative, they may take this aspect for granted, as if valuable educational time does not need to be

allocated to this “soft” aspect of the profession. It is compounded by the recognition that this aspect is harder to define and to measure than knowledge and competence. After all, we may want the health professional to understand many aspects of the human condition so that they can sensitively understand, assess and appropriately manage the suffering of the people who come to us, but it is harder to design such a course compared to outlining and teaching one on anatomy, for example.

Developing a humanities program in professional education refocuses attention to what everyone recognizes as important, but rather than take it for granted, it makes it a part of the educational program and signals that the school takes it seriously and encourages activities related to the broad area of the humanities.

The humanities cover many areas, including history, ethics, literature, philosophy, theology, art, music, language, law, and the social sciences as they apply to the profession. The humanities are distinguished by their focus on human values. Emphasis on human values is important in this age as we are increasingly at risk of being overwhelmed by more technology and complex bureaucracy. History of the profession gives us an understanding of how we have come to be where we are, and how things change and progress. Literature can teach us about human hopes and aspirations, of suffering and loss, of relationships and life and death.

In medical education during the 18th and 19th century there was an emphasis on the humanities, once within medical training and later as a preparation for medical school. As time went on, particularly encouraged by the increasing interest in medical sciences, laboratory and technological aspects of the profession, emphasis in medical school and also in the premedical studies was heavily weighted towards courses in the sciences. The Flexner report for the Carnegie Foundation in 1910 recognized the variable quality of medical education and the need to have better teaching in the medical sciences and laboratory methods. This resulted in a pendulum swing in emphasis, directing the curriculum to the medical sciences in premedical as well as medical education, to the exclusion of the humanities, an imbalance which was never intended by Flexner.

At Dalhousie Medical School the humanities are developing as an increasing activity of the medical student and in their lives and the atmosphere of the medical school. We

have elective programs in the humanities, summer research studentships, awards for students and faculty in the medical humanities, and some lecture series and “brown bag” lunch noon presentations and discussions. There is an artist-in-residence program that brings artists (painters, muralists, poets, storytellers) to spend time in the school and with the students. There is a large choir of over a hundred students and faculty, a concert band, a 13 piece string ensemble, groups of student storytellers, and student artists who put on regular performances and exhibitions. The list of activities is much longer but I just make the point that these provide some balance in the emphasis of the medical school, and broaden the life and learning of the student.

Perhaps more important than the humanities activities themselves is the change in mind-set that occurs when the humanities are encouraged and the students see that such diversity in their studies and activities are legitimized and encouraged. We emphasized that we wanted the students and faculty to continue to express the interests and talents they had before coming into medical school. They now come forward with ideas and activities that are much more imaginative and exciting than we would have designed. They also comment that the humanities has made medical school a more enjoyable and fulfilling experience and they see that their learning and their lives can be more balanced, making them better equipped to care for their patients.

Will involvement in the humanities make one a better health professional? It is a question often asked but very difficult to document in this evidence-based era of medicine. But as Pellegrino said of learning ethics, it cannot guarantee that a person will be more ethical, but it is more likely than not.

My firm belief is that all the healing professions should increase the balance of the humanities with the traditional educational emphasis on skills and knowledge, and this will benefit both the healers and those who need to be healed.

References

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