

MEDICAL EDUCATION

The 'medical humanities' in health sciences education in South Africa

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A new masters-level course, 'Medicine and the Arts', will be offered in 2014 at the University of Cape Town, setting a precedent for inter-disciplinary education in the field of medical humanities in South Africa. The humanities and social sciences have always been an implicit part of undergraduate and postgraduate education in the health sciences, but increasingly they are becoming an explicit and essential component of the curriculum, as the importance of graduate attributes and outcomes in the workplace is acknowledged. Traditionally, the medical humanities have included medical ethics, history, literature and anthropology. Less prominent in the literature has been the engagement with medicine of the disciplines of sociology, politics, philosophy, linguistics, education, and law, as well as the creative and expressive arts. The development of the medical humanities in education and research in South Africa is set to expand over the next few years, and it looks as if it will be an exciting inter-disciplinary journey.

S Afr Med J 2014;104(2):109-110. DOI:10.7196/SAMJ.7928



The University of Cape Town (UCT) will offer a new masters-level course through the Faculty of Humanities named 'Medicine and the Arts' for the first time in 2014, attracting interested humanities and health sciences students. The course aims to

facilitate the exploration and engagement of the trans-disciplinary space between health sciences, social sciences and the arts. Twelve seminars over one semester will guide students through the life cycle from birth to death as seen from the perspectives of artists, medical doctors, and social scientists.

Each seminar will be jointly presented by an artist, a social scientist, and a medical practitioner discussing a core theme, highlighting the multiple ways in which the body is conceptualised. Students will have the chance to think through the life cycle from genetics and conception to death; to share points of connection and difference; and, in the process, to develop relationship synergies between arts, social sciences and medicine. The seminars will be held in various

locations, including health facilities and museums, each contributing a specific context to the discussion. It is anticipated that new projects and initiatives will arise from the inter-disciplinary study of relevant literature, discussions and assignments.

The humanities and social sciences have always been an implicit part of undergraduate and postgraduate education in the health sciences, but increasingly they are becoming an explicit and essential component of the curriculum, as the importance of graduate attributes and outcomes in the workplace is acknowledged.^[1] Specific sets of skills and attitudes are required for professional behaviour: the ability to work in a team, the application of medical ethics, meaningful communication, active listening, the facilitation of patients' expectations and fears, developing partnerships with patients and families, and co-creating feasible management plans with patients.^[2,3] No-one would disagree that our graduates need to be empathic,^[4] able to communicate well with their patients and colleagues, and mindful of patient autonomy, and that they need

to show respect for cultural diversity.^[5,6] However, how to produce such noble educational outcomes is the subject of much debate: while some would claim that the humanities and the arts have a role to play in producing different kinds of health professionals, others see the medical humanities primarily as a critical intellectual space for reflexive contemplation of the power of medicine, the history of medicine and the cultural ways in which biomedical frameworks have been interpreted.

What do we mean by the 'medical humanities' in the context of health sciences education? This phrase is in quotation marks because it is a starting point for discussion, and not quite the right term. There is a substantial body of literature associated with the medical humanities, including a number of dedicated journals based in Europe and the USA.^[7,8] Firstly, since we are dealing with health sciences education and not just medical education, the issues need to be broadened to include the health sciences apart from medicine. Secondly, medical humanities frameworks may or may not be helpful in a South African (SA) context, where issues of social justice and health inequalities dominate delivery of healthcare. Since a medical humanities course was first proposed by Benatar^[9] in 1997 as a formal component of SA curricula, little further development has taken place. Furthermore, most medical humanities studies are carried out by humanities scholars in the field of medicine, as opposed to medical or health sciences education, using a humanities or social science lens.

Much as scholars of the humanities would prefer to maintain the integrity of their disciplines in an academic environment,^[10] the empirical basis of Western medicine forms the dominant paradigm in health sciences education. Our students need an appreciation and respect for different ways of seeing and describing the same phenomenon, principally centred around the illness experience, and our graduates need to access appropriate skills and tools as the situation demands it. On the one hand they need the technical skills of biomedicine that have been shown to be helpful to populations through randomised controlled trials, but this needs to be tempered, as Osler said,^[11] by a sensitivity to the individual who is the patient, so that the appropriate intervention can be tailored to the patient's particular need. This requires a certain flexibility on the part of the student and the health professional: slipping in an out of different paradigms is a complex business better suited to certain personalities than others.^[12]

Traditionally, the medical humanities have included medical ethics, history, literature and anthropology. These disciplines use critical, interpretive or historical methods, in addition to the empirical approaches that dominate Western medicine. This can be very confusing for lecturers as well as students in the health sciences who take a positivist paradigm for granted, having been exposed to little else.^[13] Less prominent in the literature have been the disciplines, together with their associated theoretical frameworks, of sociology, politics, philosophy, linguistics, education, and law, as well as the creative and expressive arts. The last have developed a special place in healthcare through music, art and drama therapy, which constitute a parallel stream of education and practice that is sometimes referred to as 'complementary and alternative medicine', with its own body of knowledge.^[14] Occupational therapists have routinely included the arts in their curricula since this forms an important part of their work.

A number of medical schools and faculties of health sciences have paid attention to the medical humanities in different forms.^[15] At UCT, for example, a structured course in 'Culture, Psyche and Illness' in the second and third years of the medical undergraduate programme is run by a medical anthropologist, a psychiatrist and

a social worker, bringing cultural and psychological perspectives to cases presented in a problem-based curriculum through an integrated process. In other countries,^[16-18] a variety of courses introduce health sciences students to the self-development and reflective practice associated with literature,^[19] visual art, drama and film media.^[20]

Special studies modules and electives offer students the opportunity to explore areas in the arts or humanities in which they are particularly interested, and which would otherwise have remained closed to them. Medical ethics now forms an important and examinable part of all curricula, often integrated into clinical courses.

At a postgraduate level, a number of diploma and masters programmes in medical humanities exist overseas, but none apart from bioethics are offered in this country. The UCT masters-level course 'Medicine and the Arts' sets a precedent in the SA context, and it is important to establish the field appropriately in relation to existing literature and theory. In parallel with educational initiatives, in September 2013 the Wits Institute for Social and Economic Research (WISER) brought together the first-ever conference on the medical humanities in SA. Entitled 'Body Knowledge', the meeting stimulated the exchange of ideas across many different disciplines and set the stage for the development of the field. A follow-up conference is planned in Cape Town in 2014, addressing the theme of medical humanities in Africa.

The National Research Foundation is supporting the development of a new research field of medical humanities through a grant aimed at defining exactly what we mean by the term in the SA context, and at expanding our networks to include scholars working in other countries in Africa. Rather than defaulting to the North American and European definitions and understandings of medical humanities, it seems important to explore the field within our own SA cultural, historic, geographical and political context. This may result in a greater emphasis on notions of community, or traditional forms of healing, or poverty and social justice, for example.^[21]

The development of the medical humanities in education and research in SA is set to expand over the next few years, and it looks as if it will be an exciting inter-disciplinary journey.

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Accepted 8 January 2014.