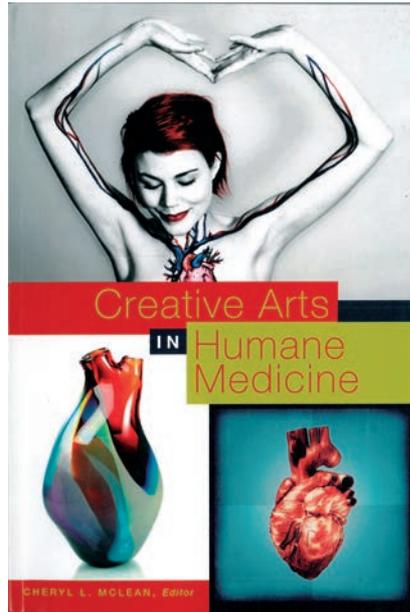


Creative Arts in Humane Medicine

Ed. by Cheryl McLean. Alberta:

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'... the medical toolkit offers not the way of engaging with or alleviating patient suffering, but one way, a one-dimensional

tool for three-dimensional problems.'
(Louise Younie, p. 166)

Certain tenets of traditional medical education and practice are under review. Best practice tended to focus on scientific fact alone, discarding the complex story and emotional detail of a patient's circumstances as either falling outside the domain of medicine or being irrelevant to care. The relationship between patient and medical practitioner was left unexamined, except by a few pioneers like Balint.

Recent developments in transdisciplinary fields such as medical humanities bring creative practice, emotional life and narratives of illness back into the argument for improved care for both patients and health professionals.

Creative Arts in Humane Medicine is a reference book for medical educators. The editor has grouped the chapters in a useful way:

1. Using the arts to teach and stimulate empathy. Contributors argue for training in empathy in medical schools as an essential tool in patient care. The book contains many interesting ideas for those who wish to both enliven and deepen their teaching of undergraduates.

2. The use of artistic practice in practitioner self-care. The multiple stressors encountered in most medical fields can lead to depression, addiction and burnout. Incorporating the arts

into the medical curriculum emphasises the value of play and creativity as means to manage stress, ambiguity and uncertainty. Artistic practice assists medics to reflect, debrief, and form a community with their peers.

3. How the experience of illness, disability or accident affects the shape of a person's life, and how they can communicate that experience to others through artistic projects to improve understanding and empathy.

4. The creative arts in action for change in medical education – assessing how arts-based inquiry can be incorporated into the curriculum. '... all illness narratives speak of an interrupted life ... Constructing an illness narrative is an attempt to "discover, or create, a meaning that can bind it together again"' (J K Schwind, p. 125).

'Engaging with patient suffering takes us beyond the physical, into the social, emotional and existential realms, beyond the biomedical, into the biographical ...' (Louise Younie, p. 166). The book makes a strong case for broadening the base from which we as medical professionals live and work.

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