

Allan D. Peterkin and Anna Skorzevska eds., *Health Humanities in Postgraduate Medical Education: A Handbook to the Heart of Medicine* (Oxford: Oxford University Press, 2018)

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The first aim of Peterkin and Skorzevska's edited collection is to address a gap in pedagogical literature. Many undergraduate medical programmes now incorporate the humanities, yet this training often disappears when students progress into residency, fellowship, or junior doctor roles, and there is a dearth of resources for this provision. Secondly, to illustrate the essential value of incorporating arts and humanities training into the postgraduate medical curriculum. It is in this sense a call to arms, pushing against the 'reductionist and positivist' agenda of Evidence-Based Medicine. The authors hope such work will inspire a transformation in pedagogy, improve clinical encounters and the treatment of patients, but also practitioners' own wellbeing, helping young doctors with identity formation and self-care. I was pleased to see the editors' introduction acknowledging that part of the function of the arts and humanities in this context is to critically reflect on the limits of medical practice. Several chapters expand on this to emphasise how humanities training gives students the tools to question, critique, and resist the detrimental power dynamics of the medical systems they work within, as well as equipping them with communication skills and improving wellbeing.

Overall, this collection is a thoroughly enjoyable and inspiring read, deftly incorporating complex pedagogical theory and big questions of social value, while remaining accessible and engaging. The chapters are multi-disciplinary, authors writing from Canadian, American, and British contexts, yet despite their diversity are widely applicable. The book is both a substantial argument for using the arts and humanities, and a highly practical 'how to' guide: every chapter comprehensively cites related resources, gives advice about the practical running of sessions, and provides suggested lesson plans via a web link. Together the essays offer numerous fascinating instances of the bringing together of humanities and medicine in practical settings, and draw attention to productive points of connection and departure.

Leonard and Tau's chapter encourages using film as a tool of critical reflection in residency training, as the theory of 'the gaze' is key to both film studies and medical knowledge (i.e. Foucault's 'clinical gaze'). Revealing the relationship between power and looking in film thus impacts on the practitioner/patient relationship. They note examples of films that examine illness and the clinical encounter, include a film analysis, and cover practical considerations of this method of teaching.

The book includes many personal testimonies by the authors as to the benefits of arts and humanities training. Arntfield and Hynes' chapter on narrative medicine draws on personal observations and conversations with dozens of colleagues to foreground the need for an understanding of *story* when providing and receiving care: narrative competence which can be taught through various forms of humanities training.

Stern and Wall's chapter on using visual art explores how the hidden curriculum of negative bias, assumptions, prejudices and behaviours can be countered with workshops that teach both critical *looking* at art, and the creative *making* of art. They suggest discussion prompts that would enable anyone to lead a class on a piece of visual art. As well as indicating the significance of embodied practice, they also carefully explore the challenges and recommendations of incorporating visual arts-based methods into residency training.

The chapter on the use of theatre, authored by Nelles, Hamilton, D'Alessandro, Rezmovitz, Gao, Lena and Skorzewska, extends the argument that an embodied approach is fundamental to practicing medicine. They demonstrate how theatre workshops on voice, movement, improvisation and acting build confidence, communication skills, and are ideal tools 'to develop the body as a site of knowledge'.

In addition, chapters on bioethics education, social science, teamwork, and medical history highlight how much deeper a physician's understanding of factors contributing to illness will be if they have a thorough grounding in the socioeconomic and political factors that impact on health, and the transient nature of medicine revealed by a historical perspective. Likewise, how the clinical experience would

improve if trainee doctors were prompted to reflect more on their own ethics and had active training in working collaboratively.

Kelly's chapter is a succinct overview of the medical humanities, and makes playful use of the Apollonian and Dionysian to characterise the 'two cultures': she enacts a humanities approach by using Greek mythology to illustrate pedagogy. She notes that many are troubled by the demarcation of the humanities as having a purely empathetic or wellbeing-focused role, while in fact 'a fundamental role of MH is to be provocative and critical, where students should be encouraged to question the structures and systems within which they learn'. Kelly extols the 'productive instability' that the tension between the arts and the sciences provokes. This chapter provides a perspective which is essential to this book and to the field.

In the final chapter, Tomas offers a reality check: passion and dedication are not enough to introduce the humanities into a postgraduate medical programme. It requires manpower, a plan and a strategy, evidence of usefulness, and funding. Tomas gives tips and suggestions with realism, hard truths, and humour, from the basic to the revelatory, around funding and promoting arts-based initiatives in a pedagogical setting. This chapter is an important inclusion: solid advice about implementation prevents any criticism of this book being unrealistic or purely aspirational.

The book closes with an afterword by Irvine which describes a typical narrative medicine workshop for interns. It is rather moving, and illuminates the value of this practice. The afterword encapsulates the vision of the collection; it imagines a future generation of doctors who, thanks to a holistic programme of training, are encouraged to be intuitively empathetic and good at communicating, content in their own identities, ethics and ideologies, and equipped with questioning and enquiring minds. As Irvine notes: 'to become a doctor – a lifelong work – is to become ever more human. Only the humanities can teach us what this means'.

This book's relevance to those interested in implementing arts and humanities training with postgraduate medical students is clear, and I believe extends to anyone interested in the relationship between humanities and medicine. It makes an

effective case for the humanities' central significance in the training of medical professionals, and exhibits the exciting richness of opportunity in this form of training.