

Taking a Broad Perspective on Medical Education

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Keywords: science, philosophy, humanities, 21st,

Science needs the humanities. Medicine needs philosophy. We are at a point where research and technologies are intersecting with fundamental issues of what it means to be human, to be alive, and to exist in a global society. To ask a person to answer these questions and act on their conclusions using purely scientific facts is no longer a viable option: the interpretation of these “scientific facts” carry too much moral and societal weight. As medicine advances and is able to delve deeper into personal realms that are no longer limited to bodily concerns, medical schools in the United States have expanded their curricula to better prepare their students for the realities of the medical profession’s role in the twenty-first century.

On the West Coast, the University of Washington School of Medicine requires M.D. students to complete at least four “non-clinical selective credits” prior to any clinical curriculum. These credits are department-approved electives that are meant to enhance the student’s medical education, without involving direct patient care, and can then serve to inform their future patient interactions. Some of the departments that students are encouraged to choose from include Bioethics and Humanities, Global Health, and Psychiatry and Behavioral Science. As one scrolls through some of the specific course offerings, one notices that they involve multidisciplinary approaches to medical questions and specifically address themes such as the role of spirituality in healthcare and the impact of society on one’s health. These are courses that will not only aid in students’ understanding of the physician-patient relationship, but will also challenge them to consider the impact of their research for the medical community and society as a whole.

The University of Washington is just one example of this trend in medical education. Many other universities, including those with a strong reputation and history of success in clinical practice and research, are taking a broader view in what a medical education should entail. Within the “Education” section of its website, Johns Hopkins School of Medicine explicitly states: “Education in medical history, ethics, even literature informs and expands the learning experience.” Its mission statement goes on to include a section regarding “The Social Context of Medicine” and directly describes the need to “[u]nderstand and respond to factors that influence the social, behavioral, and economical factors in health, disease, and medical care.” The inclusion of these sentiments may then serve as a framework for all aspects of learning, even in clinical- or laboratory-based work.

The University of Washington and Johns Hopkins University are not the only American universities following this trend. The “about us” or “curriculum” sections of most schools highlight terms such as compassion, humanity, and ethics. With new information technologies allowing the general public greater and more expedient access to knowledge of medical events, graduate medical programs cannot afford to ignore the need for humanities in medical education. Enabling students with the tools to best debate the moral and social implications of their actions can only lead to a better sense of responsibility and accountability. Scientific advancements without this type of self-knowledge and regulation will only serve to undermine the credibility of medicine in the public sphere. Hopefully, the success of medical schools taking such a broad perspective in their curriculum will trickle down and allow undergraduate pre-medical students the same access to the seemingly

self-contained realms of both science and the humanities. A greater knowledge and interest in one should not exclude access to the other.

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