

Advocating for Increased Use of Humanities to Develop Interpersonal Skills in Pharmacy Students

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ABOUT THE STUDY

Poirier previously called for a “neo-humanism” as part of a radical social reform movement for pharmacy education [1]. The need to enhance the human side and the affective domain of the profession as iterated by the ACPE Standards 2016, makes it the right time for a new movement in pharmacy education [2]. Poirier also previously outlined the need to acquire skills to provide the best possible patient care [3]. The term “patient care literacy” was coined and defined. As defined, patient care literacy is the ability to provide care using interpersonal skills of self-awareness, empathy, ability to relate to others patient-centered care abilities and culturally competent communication. Self-awareness is the conscious knowledge of one’s own character, feelings, and motives and desires [4]. Empathy is putting you in someone else’s shoes [4]. Ability to relate to others is establishing a connection, association, and/or mutual respect with another [4]. Patient-centered attitudes is a respect for patient autonomy and is providing care that is respectful of an response to individual patient preferences, needs and values, and ensuring that patient values guide all clinical decisions [4]. These outcomes are the essence of the health humanities programs developing in the United States [5,6].

A conceptual framework for curricular reform that focused on using the arts and humanities was published [3]. Previous research published by Poirier et al described and evaluated a health humanities course for developing the patient care literacy skills [4,7]. The discussion course consists of assignments and self-reflections using various media such as films, poetry, artwork, internet sources like blogs and podcasts, and literature like books and short stories. The course helps students make human connections and develop self-awareness, ability to relate to others, empathy, and communication. The course blends health care topics with the humanities and results in synergy for developing patient care literacy.

For examples, a topic such as stigmatization and biases toward addiction, gender reassignment, mental illness and HIV is

examined with use of films e.g., *The Danish Girl*, *One Flew over the Cuckoo’s Nest*, *As the Band Played On* and internet sources such as blogs and podcasts [3,4]. Professionalism is studied by viewing the film *Patch Adams* or reading short stories such as “*The Treatment*” by Roxana Robinson, or “*At the Pharmacy*” by Chekhov [3,4]. Health care ethics is studied by viewing an episode of the television series *House* and watching the film, “*Miss Evers’ Boys*” [3,4]. This later films introduces the topic of research ethics by focusing on the Tuskegee trial. Insurance and access to care is addressed by playing the board game, “*The Last Straw*” which focuses on social determinants of health [3,8]. Viewing video clips from films such as *Damaged Care*, *First Do No Harm*, *Article 99* or *John Q* is another approach [3]. Using the movie “*In the Family*” helps to examine the topic of disclosure of genetic information and how that may affect access to health insurance [3]. To enhance student’s abilities to relate to others and develop empathy, sessions on patient experiences are delivered. Delving into Alzheimer’s is done with use of a film like *Iris* and also reviewing poetry such as “*Time with the Dying*” by Linda Alexander, and “*We All Fall down*” by Nancy Dahlberg [3,4,9]. A poem by Amy Haddad titled “*Second Degree Block*” provides perspectives on the importance of the human connections versus focus on the technical competency of health delivery [3,10,11]. Students also compare two accounts of a breast cancer patient experience with side effects. In one account was a technical view of chemotherapy side effects as reported in the *New England Journal of Medicine*. In comparison, the other account was a poem by Julia Darling’s “*Chemotherapy*” which describes how the patient feels about experiencing chemotherapy side effects [12]. Using poetry to describe the patient experience resulted in enhanced empathy and ability to relate to the patient [4]. Aging and death and dying is addressed by using poems such as “*Do Not Go Gentle into the Good Night*” by Dylan Thomas and short story such as “*A Summer Tragedy*” by Anna Bontemps [3,4]. The PBS Frontline on “*Being Mortal*” by Atul Gawande is also used [3,4]. A common reading using the novella, “*And Every Morning*

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The Way Home Gets Longer and Longer” by Fredrik Backman is also used for this topic [13].

Writing topic reflections consists of response to three open-ended questions: 1) what did you learn about the assigned topic; 2) how did you feel after reading/viewing about the topic; and 3) how did the discussions about the topic impact your views [4].

The course requires each student to read and report on a unique book. A list of nearly 50 books is provided [3,4]. The scope of topics encompasses the range of topics addressed in the course. It also includes non-fiction and fiction books. The written and oral report requires student to identify both primary and secondary health care themes which are defined as humanistic and social issues. It also requires addressing how health care professionals are portrayed, whether stereotypes are created or reinforced, and any ethical issues. Students must also provide personal perspectives on how they react to the characters in the book and indicate how their interactions with similar issues would be affected. The course was assessed by mixed-methods consisting of evaluating the written reflections using a modified rubric for measuring the depth of reflections for self-awareness, empathy, respect for patient autonomy and ability to relate to others [4]. A survey administered as a pre-post course methods consisted of 9 statements measuring empathy, 7 statements for respect for patient autonomy, 12 statements measuring ability to relate to others and 6 statements measuring self-awareness [4]. The final written book report resulted in the highest levels of reflectiveness for most of the interpersonal skills and especially with empathy and respect for patient autonomy [4].

Poirier et al in a recent special issue of the arts in health professions education described the incorporation of visual thinking strategies (VTS) into the health humanities course and the effects on students’ observational skills [14]. The approach used art works that complemented the week’s discussion topics. Using VTS students discussed what they saw; what made them think that; and what more did they see? Even though this study did not provide robust evidence of value of VTS in enhancing observational skills, it provided resources and methods to assess the impact using a larger sample size and a randomized control group.

The essence of developing interpersonal skills for patient care literacy using HARTSS (humanities, arts and social sciences) as proposed by Kahn and Zeidler could clearly be addressed by incorporating health humanities as a curricular approach [15]. The use of humanities to develop interpersonal skills for patient centered care is a reasonable approach [16-18].

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