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Medical Humanities in the Nepalese context

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ABSTRACT

Medical humanities use the creative and intellectual strengths of the arts for specific purposes in medical education. The author read with great interest the Medical humanities program at the Patan Academy of Health Sciences and has been associated with Medical humanities since 2007. There are several factors favouring the development of Medical humanities in Nepal but the major challenge is there is no specific faculty and/or department involved and the discipline may be relegated to the background in the face of other pressing priorities. In the west humanities faculty had played an important role in popularizing Medical humanities. Clinical teachers can incorporate Medical humanities into their clinical teaching. Large student sizes and lesser number of faculty may be challenges in moving the discipline forward.

Keywords: Medical humanities, medical schools, Nepal, undergraduate medical

INTRODUCTION

Medical humanities (MH) use the creative and intellectual strengths of diverse disciplines, including literature, art, creative writing, drama, film, music, philosophy, ethical decision making, anthropology, and history, in pursuit of medical educational goals.¹ MH has an important role in the education of future doctors and other healthcare professionals. The article by Helen and co-authors on the MH module from Patan Academy of Health Sciences (PAHS) is one of its kind evidence regarding MH development in Nepal.²

Medical Humanities development in Nepal

Efforts have been made regarding voluntary module development at Manipal College of Medical Sciences, Pokhara, to KIST Medical College in Lalitpur.³ PAHS has a long-standing interest in MH and during the early years we shared ideas about the role of the humanities in health professions education. Dr Huw Morgan who was associated with PAHS had also contributed to the KISTMC module. PAHS with its mission of educating doctors for rural Nepal is uniquely placed to implement and support a MH module. An interprofessional health humanities module can be considered.

It is always challenging to develop a sustainable model for medical humanities in Nepal due to various reasons. Framework has been build in the past and the faculty who were interested also developed modules. Several

faculty members may express interest initially but due to factors mentioned later their interest is not sustained and developed. In an article published in 2014 had discussed the scenario of MH in Nepal.⁴

FAVORABLE FACTORS AND CHALLENGES

In Nepal there are several factors favouring the development of MH. The curriculum is integrated, early clinical exposure is offered and there is a strong community involvement in many institutions. The major challenge in my opinion is that MH may be no one's baby. Responsibility is spread across various departments which in some ways is a good thing. The course is not yet mandated by universities. People get involved due to their own personal interest but there is no financial or other motivation to continue being involved. MH is regarded as something which is good to know and can be incorporated in the curriculum but less important than the core scientific and clinical knowledge. However, in the absence of ownership and of dedicated faculty members, soon those involved find it difficult to balance their interest in MH with their other pressing daily assignments in teaching-learning, patient care and research.

ROLE OF HUMANITIES FACULTY

In the west humanities faculty played an important role in developing the discipline along with medical educators and medical faculty. In many countries

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a foundation course is required for school leaving students before admission to the undergraduate medical program. In Malaysia students in private educational institutions are required to undertake a course in English for academic purposes (to further develop their skills in academic writing in English and to be more comfortable with English, the medium of instruction for the medical course) and General studies called Mata Pelajaran Umum (MPU).⁵ MPU is usually offered by humanities faculty and at the International Medical University, a MH module has been offered since 2007 to medical students.⁶ Humanities educators are also associated with the foundation course in Caribbean medical schools though they have not been usually involved in teaching-learning of MH.

THE WAY FORWARD

Involvement of all faculty members for teaching medical humanities should be the way forward. A core course can be offered during the preclinical years with components and electives offered during the clinical postings. Some faculty members involved with previous MH modules at Manipal College of Medical Sciences, Pokhara and KIST Medical College, Lalitpur use some of the principles in their clinical teaching according to my interactions with them. Clinical preceptors emphasizing MH will underscore its importance and motivate students.

Bioethics has traditionally been taught in the medical curriculum in Nepal and South Asia. Recently in India, an attitude, ethics, and communication (AETCOM) module has been implemented offering a broad framework to teaching learning and assessment of these skills.⁷ The module can be further developed by faculty in individual institutions. Many faculty members, especially those who have higher training in education have expressed interest.

CONCLUSIONS

In Nepal, the universities can develop a draft MH curriculum which can be further developed by individual colleges. Autonomous institutions can develop their own curricula. A degree of coordination and consultation among different institutions is necessary to ensure the MH curriculum addresses issues of importance to Nepal like economic challenges, physical challenges in accessing healthcare, the rapid socioeconomic changes, increasing education levels and the influence of diverse cultures and ethnic groups in the country on health and healthcare among others.

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