



Humanities in Health Policy and Advocacy

Margo Minnich, DNP, RN, Creighton University
Zach Hennes, BSN, RN, Creighton University

1

Objectives

At the completion of the presentation, participants will be able to:

- Incorporate humanities into health policy and advocacy coursework to facilitate understanding of the complex human challenges of our time.
- Facilitate interprofessional discussions to address current policy issues in health care.
- Engage students in problem solving and policy development through creative thinking and collaboration across disciplines.

2

Disclosure

Relevant to the content of this educational activity, the presenters do not have any financial conflicts with commercial interest companies to disclose.

Thank you to the *Kingfisher Institute for the Liberal Arts and Professions* for the opportunity to participate in the *Health Humanities IPE Curriculum Innovation Fellowship*

3

Background

- Health policy impacts ALL health care professionals and should be addressed in ALL education programs
- American Association of Colleges of Nursing Essentials of Baccalaureate Education for Professional Nursing Practice include education in the liberal arts and health care policy¹
- The Study of humanities helps to fill these needs²
 - Policy must be developed with historical perspective of culture and tradition³
 - Leads to empathetic healthcare professionals

4

Literature Review

Health humanities progresses healthcare's relationship with patients

- Way to rebuild trust with communities, understand broader social context^{4,5}
- Sustainable interventions through radical interdisciplinarity⁶
- "Health Humanities" encompasses holistic health⁷

Health humanities broadens students' worldview

- Complicated paradigms where health exists³
- Humanities is already entangled in clinical experience; education equips students to notice it⁸

Implementing health humanities

- Reflective writing grows skills, knowledge, aspirations, and attitudes⁹
- Leads to empathetic critical thinking on diverse range of social issues affecting health^{10,11}

Equips students to advocate for policies promoting health¹²

5

The Birth of the Book Club

- First introduced in a required nursing course: Policy and Advocacy in Health Care
- Center for *Center for Interprofessional Practice, Education and Research* partnered with the *Kingfisher Institute for the Liberal Arts and Professions* to offer a *Health Humanities IPE Curriculum Innovation Fellowship*
- Began implementing the same kind of Book Club discussion with groups of interprofessional students.

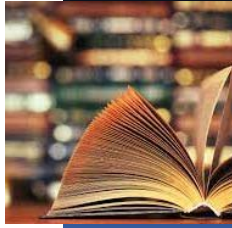
6

The Birth of the Book Club

The purpose shifted to interprofessional collaboration around policy and advocacy
Books chosen for cultural/historical significance

Books:

- Five Days at Memorial: Life and Death in a Storm-Ravaged Hospital¹³
- How We Do Harm: A Doctor Breaks Ranks about Being Sick in America¹⁴
- The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures¹⁵



7

Book Club Requirements

- Students were required to read the entire book and submit a discussion question with their personal answer prior to the discussion.
- Students had to actively engage in the scheduled Book Club discussion.
- Students had to complete an IPE Passport Activity Survey and submit a written reflection addressing the activity objectives after the discussion.

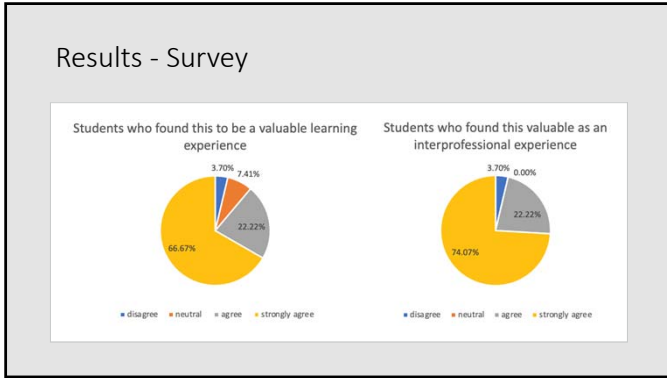


8

Results

- 27 Interprofessional students participated in 3 Book Clubs
- Survey data provided perspective on the learning experience.
- Written reflection data provided perspective on the learning achieved

9



10

Results - Survey

Please comment on how you will use the interprofessional collaboration information/skills gained in your future practice.

- "I learned some valuable information from nurses and nursing students and will remember to always respect and seek out their opinions."
- "During our session, we talked about the lack of communication on healthcare teams and how problematic that is. I will keep that in mind in future practice and be sure to properly communicate with my healthcare team and make sure everyone knows their work and opinion is valued and appreciated."
- "I will utilize the skills and information gained as a future practitioner by being courageous of bringing up those tough questions to continue having conversations about topics brought up in this book and in our Creighton education. I will seek to listen and understand the roles of various health professions and their perspectives."

11

Results - Survey

Please share any positive comments about your experience with this IPE Passport Activity.

- "It was awesome to make the acquaintance of other students who are a part of the Creighton family. I loved, as I mentioned before, hearing their perspectives (similar and different). Based on everyone's backgrounds, they been exposed to different experiences which leads them to think of questions or viewpoints I never would have thought of. I always appreciate hearing from people who think differently than I do."
- "I loved the open environment of this IPE activity. Everyone could share their opinion and not be judged. Everyone was always respectful and the inter professional conversations we had brought insightful knowledge. Dr. Minnich kept the conversation interesting and was open to what everyone had to say."

12

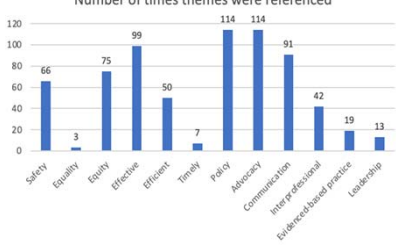
Results – Written Reflection

- Reflection data was reviewed for themes
- 12 themes coded:
 - safety, equality, equity, effective, efficient, timely, policy, advocacy, communication, interprofessional practice, evidence-based practice, and leadership.
- Themes were related to Core Competencies for Interprofessional Collaborative Practice from the Interprofessional Education Collaborative (IPEC)¹⁶

13

Results –
Written
Reflection

Number of times themes were referenced



Theme	Number of references
Safety	66
Equality	3
Equity	75
Effective	99
Efficient	50
Timely	7
Policy	114
Advocacy	114
Communication	91
Interprofessional	42
Evidence-based practice	19
Leadership	13

14

Results –
Written
Reflection

Advocacy

- "In order to address the complex health issues, we must each begin to advocate for appropriate and most beneficial care our patients are receiving. If we don't put our foot down and advocate for our patients, who will?"
- "In the nursing profession, advocacy means preserving human dignity, promoting patient equality, and providing freedom from suffering. It's also about ensuring that patients have the right to make decisions about their own health."

Policy

- "A better solution will come up if all healthcare professionals have a voice in health policy decision making."
- "We are the front-line protection for the patients, and we see all the pros and cons to actual implementation of the policies. We can make suggestions to improve how the policies can be changed for the better."

15

Results – Written Reflection

Interprofessional Practice

- “We need to rely on each other as an **interprofessional team to back each other up when recommendations for an intervention are given**, and we need to **check each others’ information** so we can either endorse or question the information clients receive from a team member.”

Leadership


- “Leadership skill is what I’m learning the most from this experience. **Leadership skills and competencies will allow me to act as full partners with physicians and other health professionals in redesign and reform efforts across the health care system.**”

Evidence-based Practice

- “Research and practice are another good strategy to **identify and develop evidence-based improvements to care**, and these improvements should be tested and adopted through **policy changes across the health care system.**”

16

- Competency 1: Work with individuals of other professions to maintain a climate of mutual respect and shared values. (Values/Ethics for Interprofessional Practice)
- Competency 2: Use the knowledge of one’s own role and those of other professions to appropriately assess and address the health care needs of patients and to promote and advance the health of populations. (Roles/Responsibilities)
- Competency 3: Communicate with patients, families, communities, and professionals in health and other fields in a responsive and responsible manner that supports a team approach to the promotion and maintenance of health and the prevention and treatment of disease. (Interprofessional Communication)
- Competency 4: Apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan, deliver, and evaluate patient/population centered care and population health programs and policies that are safe, timely, efficient, effective, and equitable. (Teams and Teamwork)




17

Results – Written Reflection

IPEC Core Competency subcategories¹⁶:

- VE10 → Safety
- VE9 → Equality
- VE1 → Equity, Advocacy, Policy
- TT5 → Effective, Efficient, Timely
- TT5 → Leadership
- CC4 → Communication
- CC7 → Interprofessional practice



18

Discussion

The Book Clubs are effective in achieving interprofessional competency

- Themes and subcategories strongly emerged in the written reflections

Students drew clear connections between book reflection and importance to policy/advocacy

- Demonstrates effectiveness of humanities in healthcare education

Relation to IPEC competencies provided evidenced-based backing to themes

- Demonstrates applicability to health science professions post-education

19

Strengths

- Activity was voluntary
- The selected books were effective as case studies for the discussions
- Discussions were conducted in a nonjudgmental format
- The activities and reflections had no impact on students' grades
- Students had freedom to reflect

20

Limitations

- Voluntary program made it somewhat difficult to have good interprofessional representation or balance in the IP groups
- Project was not designed as research
- Questions were directed and designed for reflection on objectives rather than data collection
- Questions were not open-ended

21

References

1. American Association of Colleges of Nursing (2008). *The Essentials of Baccalaureate Education for Professional Nursing Practice*. Washington, DC: author.
2. National Academies of Sciences, Engineering, and Medicine. (2018). *The Integration of the Humanities and Arts with Sciences, Engineering, and Medicine in Higher Education: Branches from the Same Tree*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/24988>.
3. Davidson, C., & Goldberg, D. (2004). A Manifesto for the Humanities in a Technological Age. *The Chronicle Review*, 50(23), b7.
4. Bkaskley, A. (2019). Invoking the medical humanities to develop a #MedicineWeCanTrust. *Academic Medicine*, 94(10), 1422-1424. doi:10.1097/acm.0000000000002670
5. Harvey, P., Chilverwell, N., & Day, G. (2020). Arts and humanities in health professional education. *Clinical Education for the Health Professions*, 1-18. doi:10.1007/978-981-13-6106-7_49-1
6. Clarke, B., Ghara, V., & Russo, F. (2019). Time to care: Why the humanities and the social sciences belong in the science of health. *BMJ Open*, 9(8). doi:10.1136/bmjopen-2019-030286
7. Jones, T., Blackie, M., Garden, R., & Wear, D. (2017). The almost right word: The move from medical to health humanities. *Academic Medicine*, 92(7), 932-935. doi:10.1097/acm.0000000000001518
8. Viney, W., Callard, F., & Woods, A. (2015). Critical medical humanities: Embracing entanglement, taking risks. *Medical Humanities*, 4(1), 2-7. doi:10.1136/medhum-2015-010692

22

References

9. Lee, J., Lee, J., & Jung, I. (2020). An integrated humanities-social sciences course in health sciences education: Its proposed design, effectiveness and associated factors. doi:10.21203/rs.3.rs-17264/v1
10. Ilcewicz, H. N., Poirier, T. L., & Paaliden, J. (2018). Use of mixed-methods approach to assess the impact of a pre-professional health humanities honors course on developing interpersonal skills. *Currents in Pharmacy Teaching and Learning*, 10(11), 1455-1465. doi:10.1016/j.cptl.2018.08.010
11. Berry, S., Jones, T., & Lamb, E. (2017). Editors' Introduction: Health humanities: The future of pre-health education is here. *Journal of Medical Humanities*, 38(4), 353-360. doi:10.1007/s10912-017-9466-0
12. Costa, M., Kangasjanvi, E., & Charise, A. (2020). Beyond empathy: A qualitative exploration of arts and humanities in pre-professional (baccalaureate) health education. *Advances in Health Sciences Education*. doi:10.1007/s10459-020-09964-z
13. Fink, S. (2013). *Five Days at Memorial: Life and Death in a Storm-Ravaged Hospital*. New York: Broadway Books.
14. Brawley, O.W. (2011). *How We Do Harm: A Doctor Breaks Ranks about Being Sick in America*. New York: St. Martin's Press. ISBN 978-1-250-01576-1
15. Fadiman, A. *The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures*. New York: Farrar, Straus, and Giroux.
16. Interprofessional Education Collaborative. (2016). *Core competencies for interprofessional collaborative practice: 2016 update*. Washington, DC: Interprofessional Education Collaborative.

23