

Humanizing Black Lives through Narrative Medicine: Storytelling and Story Receiving

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Background

Structural racism has long affected the medical institution, producing disparities in illness prevention, healthcare access, and medical outcomes. The recent COVID-19 pandemic provided stark and tragic evidence of these effects, disproportionately burdening and killing Black and Latinx communities.¹ As rising medical professionals, **our Gold Humanism Honor Society (GHHS) Chapter sought to explore the ways in which humanism can serve as a tool for racial justice.** In 2020, we focused the University of California, Irvine School of Medicine GHHS Chapter's annual Humanism in Medicine (HiM) Night on the power of allyship and narrative medicine in humanizing Black lives.

Objective

The goals of our Humanism in Medicine event were to:

- Use the power of **Narrative Medicine to amplify the voices of Black individuals in our community through storytelling**
- Further attendees' understanding and use of Narrative Medicine as a tool to **help dismantle implicit bias and racial stereotyping**, and focus on **empowering individual stories of human life**

Materials & Methods

Our chapter collaborated with HiM speakers to develop a program that would offer attendees a historical window into the power of allyship and connect it to the lived experiences of present-day structural racism in medicine. Our event featured:

- A keynote by Dr. Willoughby-Herard detailing the **transformative power of allyship during the anti-apartheid movement in South Africa**²
- A narrative by Dr. Deena Brown on her **experiences as a Black woman** navigating the healthcare system
- An interactive Narrative Medicine activity led by Dr. Johanna Shapiro for **reflection on the power of storytelling and story-receiving**

The event took place via Zoom in accordance with COVID-19 restrictions, and the interactive activity was facilitated using the AHA Slides Platform. All participants received an interactive journal prior to the start of the event³, which served as an event program, guided attendees through the interactive questions, offered prompts for further independent reflection, and provided a "Reading List for Allyship". We surveyed attendees prior to and following the HiM event to assess the educational value of the narrative activity and their experiences reflecting on storytelling and receiving.

Results

Pre-event Survey: A total of 108 participants attended the Humanism in Medicine Night virtual event. 56% of participants were medical students followed by UCI Faculty who made up 23% of participants. 51% of event participants had no experience with Narrative Medicine prior to HiM night.

Medical Students	61 (56%)	Undergraduates or Post-Baccalaureate Students	7 (6%)
Faculty Members	23 (21%)	Staff Members	4 (4%)
Resident Physicians	3 (3%)	Other Participants	6 (5%)
Community Members	4 (4%)		

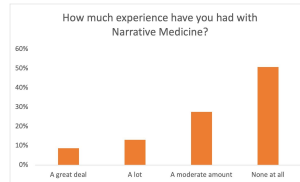
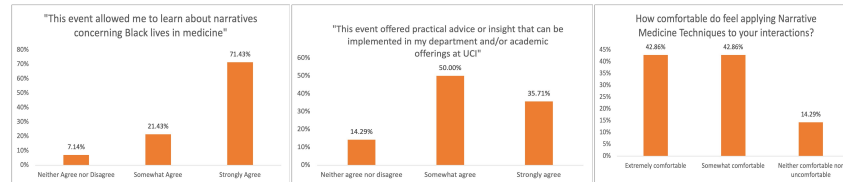
Interactive Activity: During the HiM Interactive Narrative Medicine Activity, participants had the opportunity reflect upon and respond to prompts presented via AHA slides. Select responses are provided below:

How might the way we listen to & receive a story distance us from the story and suffering of other?	"To me, systemic racism in medicine looks like..."
<i>- If we make assumptions we may block what we need to hear as opposed to what we expect to hear</i>	<i>- Me being the only Black girl in my class</i>
<i>- The way we listen is related to our capacity to feel compassion and empathy</i>	<i>- A medical school class that doesn't represent the community's demographics</i>
<i>- If we feel rushed we may not want to take time to be vulnerable</i>	<i>- Black women receiving less pain management</i>

Post-Event Survey: A total of 14 participants completed post-event surveys. Select responses are provided below:

What stories do you bring with you when you try to initiate wellness in patients?	What wisdom are you seeking from your patients?	What battles have you fought to become the (health) advocate you are today?
<i>"I bring my background, the history of my ancestors, and my personal experiences into each encounter with patients. However, I also bring my flaws, biases, and assumptions into the room, and these are things that I must recognize and actively reflect upon as I engage with the patient"</i>	<i>"Wisdom of their own bodies and experiences, which we often lose sight of. It is never done being shared, and we should never be done listening."</i>	<i>"I continue to fight as an accomplice against the rhetoric and actions of others."</i>
	<i>"I believe that everything shared by my patients comes from a place of wisdom."</i>	<i>"My own internal biases coming from a homogenous affluent white community"</i>

Post-event survey respondents also answered agree/disagree to statements about the event and use of Narrative Medicine:

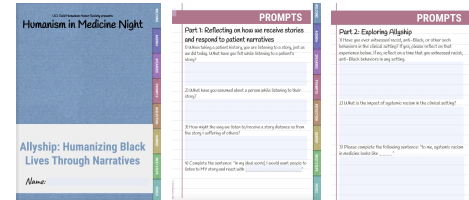


Conclusion

This event was able to reach the healthcare community at all levels of training from students, resident physicians, staff, and faculty, which highlights the level of **awareness it was able to bring regarding the harmful effects of systemic racism in medicine on Black communities.** The reflection responses as well as the other post-event survey results demonstrated that HiM Night helped participants understand how **narrative medicine strategies can be used in their personal and professional settings to recognize their own implicit bias and elevate Black narratives.** The results of the event were limited by the fact that only 14 (13%) of participants were able to complete the post-event survey. Even so, we anticipate that HiM night was just the beginning to uplifting Black voices and narratives in medicine

Appendix

Select images provided from the HiM Interactive Journal³



References

- Zelner, Jon, et al. "Racial disparities in coronavirus disease 2019 (COVID-19) mortality are driven by unequal infection risks." *Clinical Infectious Diseases* 72.5 (2021): e88-e95.
- Willoughby-Herard, Tiffany, PhD. "Telling, Stories, Trials." UCI Gold Humanism Honor Society, Humanism in Medicine Night, Dec 4, 2020.
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